

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90170 001 ****30.62
 05-07-2002 90170 002 ****30.63

DOCUMENT # N03265

1. Entity Name

THE CRESCENT BEACH CLUB AT SAND KEY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

550 GULF BOULEVARD
 CLEARWATER FL 34630

1340 GULF BOULEVARD
 CLEARWATER FL 34630

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2621913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TALARICO, LOUIS
1310 GULF BLVD
#5D
CLEARWATER FL 33767

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD ☐ Delete
 NAME: TALARICO, LOUIS
 STREET ADDRESS: 1310 GULF BLVD, #14A
 CITY-ST-ZIP: CLEARWATER FL 33767

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: SD ☐ Delete
 NAME: MUSSELLMAN, DON
 STREET ADDRESS: 1310 GULF BLVD #4G
 CITY-ST-ZIP: CLEARWATER FL 33767

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: TD ☐ Delete
 NAME: MCLACHLAN, HERB
 STREET ADDRESS: 1310 GULF BLVD #15G
 CITY-ST-ZIP: CLEARWATER FL 33767

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: VPD ☐ Delete
 NAME: DIPALO, AL
 STREET ADDRESS: 1340 GULF BLVD #14A
 CITY-ST-ZIP: CLEARWATER FL 33767

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: VPD ☐ Delete
 NAME: KRAFFT, RANDALL
 STREET ADDRESS: 1310 GULF BLVD #18G
 CITY-ST-ZIP: CLEARWATER FL 33767

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X *[Signature]* **LOUIS TALARICO** **1-16-02** **727-593-0788**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)