

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90003 045 ****61.25

DOCUMENT # N03461

1. Entity Name

TRISTAN TOWERS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**TRISTAN TOWERS
 1200 FT PICKENS RD
 PENSACOLA BCH. FL 32561
 US**

**TRISTAN TOWERS
 1200 FT PICKENS RD
 PENSACOLA BCH. FL 32561
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2545849

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**TRISTAN TOWERS - ROGER M GARNJOBST
 1200 FT PICKENS RD
 PENSACOLA BCH FL 32561**

Name

Carol Wilkes

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

220 W. Garden St., Suite 303

City

Pensacola

FL

Zip Code

32501

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

Carol Wilkes

Carol Wilkes

850-434-7633

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 **HERNANDEZ, SERIGO**
 STREET ADDRESS **1200 FT PICKENS RD 8D**
 CITY-ST-ZIP **PENSACOLA BCH. FL**

TITLE **D** Change Addition
 NAME **Hernandez, Sergio**
 STREET ADDRESS **1200 Ft. Pickens Road, 8-D**
 CITY-ST-ZIP **Pensacola Beach, FL 32561**

TITLE **VPD** Delete
 NAME **BOVE, RICHARD**
 STREET ADDRESS **1200 FT PICKENS RD 9F**
 CITY-ST-ZIP **PENSACOLA BCH. FL**

TITLE **DS** Change Addition
 NAME **Watkins, Chuck**
 STREET ADDRESS **1200 Ft. Pickens Road**
 CITY-ST-ZIP **Pensacola Beach, FL 32561**

TITLE **D** Delete
 NAME **WORK, GARY**
 STREET ADDRESS **1200 FT. PICKENS ROAD 12A**
 CITY-ST-ZIP **PENSACOLA FL 32561**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** Delete
 NAME **MANZIEK, LARRY**
 STREET ADDRESS **3431 RIER GARDENS CIRCLE**
 CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **VPD** Change Addition
 NAME **Manziek, Larry**
 STREET ADDRESS **3431 River Gardens Circle**
 CITY-ST-ZIP **Pensacola, FL 32514**

TITLE **TD** Delete
 NAME **SAVELL, DAVID**
 STREET ADDRESS **1200 FT PICKENS RD 6B**
 CITY-ST-ZIP **PENSACOLA BEACH FL 32561**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **DEWINE, JOY**
 STREET ADDRESS **1200 FT PICKENS RD 1A**
 CITY-ST-ZIP **PENSACOLA BEACH FL 32561**

TITLE **PD** Change Addition
 NAME **Dewine, Joy**
 STREET ADDRESS **1200 Ft. Pickens Road**
 CITY-ST-ZIP **Pensacola Beach, FL 32561**

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:

SIGNATURE REQ (JOY DEWINE)

PRES. Jan 10, 2002 (850) 434-7633

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CRE037 (9/01)