2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State
04-11-2002 90045 006 ****61.25

0086958

DOCUMENT # N03516

1. Entity Name

THE EXECUTIVE CENTER CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business	Mailing Address
7655 W. GULF TO LAKE HWY. SUITE 9 CRYSTAL RIVER FL 34429 US	7655 W. GULF TO LAKE HWY. SUITE 9 CRYSTAL RIVER FL 34429 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. c/o Joseph and Company
City & State	City & State Hernando, FL
Zip / Country	Zip 34442 / Country US

4. FEI Number 59-2644499 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TRINGALI, MICHAEL 7655 W. GULF TO LAKE HIGHWAY SUITE 9 CRYSTAL RIVER FL 34429	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D TRINGALI, MICHAEL 7655 W. GULF TO LAKE HIGHWAY, SUITE 9 CRYSTAL RIVER FL 34429	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director BLACKSTONE, MICHAEL 7655 W. GULF TO LAKE HWY. SUITE 1 CRYSTAL RIVER, FL 34429	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BERTOCH, CARL A 7655 W. GULF TO LAKE HWY, SUITE 13 CRYSTAL RIVER FL 34429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD O'CONNELL, MARK 7655 W GULF TO LAKE HWY #3 CRYSTAL RIVER FL 34429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 REQUIRED April 4, 2002 (352)564-8220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #