

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N07960

1. Entity Name

CAPRI HARBOR SOUTH CONDOMINIUM ASSOCIATION, INC.

FILED

02 APR - 3 PM 1:55
03-18-2002 90041 025 ***61.25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3001 EXECUTIVE DRIVE
SUITE 260
CLEARWATER FL 34622
US

3001 EXECUTIVE DRIVE
SUITE 260
CLEARWATER FL 34622
US

2. Principal Place of Business

3. Mailing Address

LAMONT MANAGEMENT
Suite, Apt. #, etc. 250 104TH AVENUE
TREASURE ISLAND FL 33706

LAMONT MANAGEMENT
Suite, Apt. #, etc. 250 104TH AVENUE
TREASURE ISLAND FL 33706

City & State

City & State

4. FEI Number

59-2877340

Applied For

Not Applicable

Zip

Country

Zip

Country

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

COLDWELL CRAIG
CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE SUITE 260
CLEARWATER FL 34622

Name SUE LAMONT LAMONT MANAGEMENT
Street Address Box Number & Not Applicable
550 104 AVE
City TREASURE ISLAND FL Zip Code 33706

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

Sue Lamont SUE LAMONT

02/05/02
DATE

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

(NOTE: Registered Agent signature required when reinstating)

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	VD	☒ Delete
NAME	BUMGARDNER, DOUG	
STREET ADDRESS	12206 2ND STREET EAST	
CITY-ST-ZIP	TREASURE ISLAND FL	
TITLE	V	☒ Delete
NAME	ROMANI, STAN	
STREET ADDRESS	12122 CAPRI CIRCLE SOUTH	
CITY-ST-ZIP	TREASURE ISLAND FL	
TITLE	PD	☐ Delete
NAME	MEEHAN, WILLIAM	
STREET ADDRESS	12130 CAPRI CIRCLE S.	
CITY-ST-ZIP	TREASURE ISLAND FL	
TITLE	TD	☒ Delete
NAME	OWENS, BILL	
STREET ADDRESS	12150 CAPRI CIRCLE SOUTH	
CITY-ST-ZIP	TREASURE ISLAND FL	
TITLE	SD	☒ Delete
NAME	DUBINSKI, MILDRED	
STREET ADDRESS	12210 2ND STREET E	
CITY-ST-ZIP	TREASURE ISLAND FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Change ☒ Addition
NAME	Ray Gary	
STREET ADDRESS	1210 Capri Circle South	
CITY-ST-ZIP	Treasure Island, FL 33706	
TITLE	VD	☐ Change ☒ Addition
NAME	Lippmann Walt	
STREET ADDRESS	12116 Capri Circle South	
CITY-ST-ZIP	Treasure Island FL 33706	
TITLE	PD	☐ Change ☐ Addition
NAME	Peelau Bill	
STREET ADDRESS	12130 Capri Circle South	
CITY-ST-ZIP	Treasure Island FL 33706	
TITLE	SD	☐ Change ☒ Addition
NAME	Overby James	
STREET ADDRESS	12118 Capri Circle South	
CITY-ST-ZIP	Treasure Island, FL 33706	
TITLE	V	☐ Change ☒ Addition
NAME	Patteott Gerald	
STREET ADDRESS	12118 Capri Circle South	
CITY-ST-ZIP	Treasure Island FL 33706	
TITLE		☐ Change ☐ Addition
NAME	Julis	
STREET ADDRESS		
CITY-ST-ZIP		

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:

DOUG B. GARDNER, PRES. 02/20/03 (727) 360-8419

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)