

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N08796

1. Entity Name

THE FORUM CONDOMINIUM ASSOCIATION, INC.



FILED
Aug 17, 2000 8:00 am
Secretary of State

08-17-2000 90003 030 ****61.25

Principal Place of Business 1705 COLONIAL BLVD. STE. B-2 1705 COLONIAL BLVD. SUITE B-2 FT MYERS FL 33907-1141 US	Mailing Address 1705 COLONIAL BLVD. STE. B-2 1705 COLONIAL BLVD. SUITE B-2 FT MYERS FL 33907-1141 US
--	--

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0978742	Applied For ☐
	Not Applicable ☐

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

6. Name and Address of Current Registered Agent

MCCAUGHAN, JAMES W., JR.
1705 COLONIAL BLVD.
SUITE B-2
FT MYERS FL 33907

7. Name and Address of New Registered Agent

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 After September 13, 2000 min. will be \$236.25	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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSTON, JIM 1705 COLONIAL BV C-2 FT MYERS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BAQUERO, WASHINGTON 1705 COLONIAL BLVD., C-1 FT-MYERS FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MCCAUGHAN, JAMES W., JR. 1705 COLONIAL BVD. B-2 FT. MYERS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSTON, JIM 1705 COLONIAL BLVD D-2 FT. MYERS, FL 33907	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOLZHAUER, KEN 1705 COLONIAL BLVD. A-2 FOOT MYERS, FL. 33907	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS 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: _____ **8-4-00** **941-936-6676**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/00)