2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State
04-18-2002 90492 004 ****61.25

DOCUMENT # N11483

1. Entity Name

BAL HARBOR BOULEVARD CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business	Mailing Address
3700 BAL HARBOR BLVD 202 PUNTA GORDA FL 33950-5256	3700 BAL HARBOR BLVD 202 PUNTA GORDA FL 33950-5256

DO NOT WRITE IN THIS SPACE

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 31-1148785. ☐ 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
DELANEY, J.T. 3700 BAL HAROBR 202 PUNTA GORDA FL 33950	Name: Joan F. Greene Street Address (P.O. Box Number is Not Acceptable): 265 TAMIAMI TR City: PUNTA Gorda FL Zip Code 33950

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: Joan F. Greene 4/8/02
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	DP HEFFERNAN, RAYMOND 3700 BAL HARBOR BLVD 203 PUNTA GORDA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP DUFFY, PATRICIA M. 3700 BAL HARBOR BLVD 205 PUNTA GORDA, FL 33950	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST DELANEY, J.T. 3700 BAL HARBOR BLVD #202 PUNTA GORDA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST O'KEEFE, THOMAS P 2289 MORNING POINT ROAMING SHORES, OH 44084	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'KEEFE, THOMAS P 2289 MORNING POINT ROAM SHORES OH 44084	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRESTON, ANTHONY 1570 QUAIL LAKE DRIVE VENICE, FL 34293	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV DUFFY, PATRICIA M 3700 BAL HARBOR BLVD #205 PUNTA GORDA FL 33950	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV JOHNS, JAMES R 327 BANBERRY SOUTH LANSING, MI 48906	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHNS, JAMES R 3700 BAL HARBOR BLVD, #201 PUNTA GORDA FL 33950	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAURER, LAWRENCE E. 1711 WEST ROUND LAKE ROAD DEWITT, MI 48820	☐ 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.

AFTER 5/1 - (508) 945-8951

SIGNATURE: Patricia M. Duffy SIGNATURE REQUIRED PATRICIA M. DUFFY 4/8/02 (941) 575-4021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #