

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90139 029 ****61.25

DOCUMENT # N19463

1. Entity Name

SEAWATCH OF BOCA GRANDE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

PO BOX 36
BOCA GRANDE FL 33921
US

Mailing Address

P O BOX 36
BOCA GRANDE FL 33921
US

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 **65-0055190**

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

THOMPSON, ROSS
16350 GULF SHORES DRIVE
BOCA GRANDE FL 33921

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ross Thompson* **Ross Thompson - Seawatch of Boca Grande H.A.** **4-7-03**

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **S** ☐ Delete
NAME **STOCHR, JAMES**
STREET ADDRESS **7 WEEBATOOK**
CITY-ST-ZIP **CINCINNATI OH 45208**

TITLE **D** ☐ Change ☒ Addition
NAME **Hockema, Douglas**
STREET ADDRESS **2807 Pioneer Club Road**
CITY-ST-ZIP **E. Grand Rapids MI 49506**

TITLE **R** ☒ Delete
NAME **ROBERTSON, ROBERT**
STREET ADDRESS **50 WEEBATOOK**
CITY-ST-ZIP **CINCINNATI OH 45208**

TITLE **D** ☐ Change ☒ Addition
NAME **Dr George Tilley**
STREET ADDRESS **31 Marville Rd**
CITY-ST-ZIP **Fayetteville Ny 13066-1017**

TITLE **P** ☐ Delete
NAME **SCHELDE, HOWARD**
STREET ADDRESS **11642 NORTH BLUFF ROAD**
CITY-ST-ZIP **TRACERSE CITY MI 49686**

TITLE **D** ☐ Change ☒ Addition
NAME **Hunka, Ramon**
STREET ADDRESS **7624 Wm. Penn Place**
CITY-ST-ZIP **Indianapolis IN 46256**

TITLE **T** ☐ Delete
NAME **THOMPSON, ROSS**
STREET ADDRESS **P.O. BOX 1975**
CITY-ST-ZIP **BOCA GRANDE FL 33921**

TITLE **D** ☐ Change ☒ Addition
NAME **Dunaway, Terry**
STREET ADDRESS **28 Portland Dr**
CITY-ST-ZIP **St Louis, MO 63131**

TITLE **D** ☐ Delete
NAME **MUNSELL, WILLIAM**
STREET ADDRESS **3155 PINNEY WOODS COURT S.E.**
CITY-ST-ZIP **CEDAR RAPIDS IA**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HOPPLE, JOHN**
STREET ADDRESS **5235 IVY FARM ROAD**
CITY-ST-ZIP **CINCINNATI OH 45243**

TITLE ☐ Change ☐ Addition
NAME
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: *Ross Thompson* **Ross Thompson Treas**

991 969-1702

CR2E037 (10/02)