2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2001 8:00 am
Secretary of State
02-06-2001 90308 007 ****61.25

DOCUMENT # N20437

Entity Name

TA VERDE WEST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3 BAHIA DEL MAR CIR PETERSBURG FL 33715	5901 SW BLVD # 200 ST PETERBURG FL 33715 US

DO NOT WRITE IN THIS SPACE

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

4. FEI Number 59-2951448 ☐ 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
FRISCH ~~GARNER~~, JUDY RESOURCE PROPERTY MANAGEMENT 5901 SW BLVD # 200 ST PETERBURG FL 33715	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 _____ 1-24-01

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	VP MELLING, CHARLES 6050 BAHIA DEL MAR CIR # 118 ST. PETERSBURG FL 33715	☒ Delete	VP TOM MULLIGAN 6000 BAHIA DEL MAR CIR. #234 ST. PETE, FL 33715	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMAS, PRAIL 6050 BAHIA DEL MAR CR #117 ST PETERSBURG FL 33715	☒ Delete	TD DENNIS STROM 6100 BAHIA DEL MAR CIR #101 ST. PETE, FL 33715	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DAVIS, FRANK 6100 BAHIA DEL MAR CIR, UNIT 207 ST PETERSBURG FL	☒ Delete	D FRED DOTY 6100 BAHIA DEL MAR CIR. ST. PETE, FL 33715	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KONOBY, PEGGIE 5900 BAHIA DEL MAR CR #140 ST PETERSBURG FL 33715	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HORNER, MICHAEL 6000 BAHIA DEL MAR CIR, 129 SAINT PETERSBURG FL 33715	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED _____ Date _____ Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR