

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State

04-09-2001 90003 019 *****61.25

0077422

DOCUMENT # N24731

1. Entity Name

WARM MINERAL SPRINGS CIVIC ASSOCIATION, INCORPOR

Principal Place of Business

12125 WARM MINERAL SPRINGS DRIVE
WARM MINERAL SPRINGS FL 34287

Mailing Address

12125 WARM MINERAL SPRINGS DRIVE
WARM MINERAL SPRINGS FL 34287

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

65-0093860

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

CURTIS, JULIUS
109 SEGOVIA COURT
WARM MINERAL SPRINGS FL 34287

Name **Kanizaj, Joseph**

Street Address (P.O. Box Number is Not Acceptable)

234 San Marco Ave.

City **Warm Mineral Springs FL** Zip Code **34287**

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 **Joseph Kanizaj Director**

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

(NOTE: Registered Agent signature required when reinstating)

Apr. 13/01

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 **PD** ☐ Delete
NAME **STROBL, APAM**
STREET ADDRESS **313 GRANADA BLVD**
CITY-ST-ZIP **WARM MINERAL SPRGS FL 34287**

TITLE **PD** ☒ Change ☐ Addition
NAME **Strobl, Adam H.**
STREET ADDRESS **313 Granada Blvd.**
CITY-ST-ZIP **Warm Mineral Springs FL 34287**

TITLE **V** ☒ Delete
NAME **BENKER, HENRY**
STREET ADDRESS **8620 TRIONFO AVE**
CITY-ST-ZIP **N PORT FL 34287**

TITLE **VD** ☒ Change ☐ Addition
NAME **Fingerhut Nick**
STREET ADDRESS **12317 Altamira**
CITY-ST-ZIP **Warm Mineral Springs FL 34287**

TITLE **T** ☐ Delete
NAME **TRASK, LINCOLN**
STREET ADDRESS **12301 LORANZA AVE.**
CITY-ST-ZIP **WARM MINERAL SPGS FL**

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

TITLE **SD** ☒ Delete
NAME **PLATT, NANETTE**
STREET ADDRESS **11300 D'ALLYON DRIVE**
CITY-ST-ZIP **WARM MINERAL SPGS FL**

TITLE **SD** ☒ Change ☐ Addition
NAME **Warner Joyce**
STREET ADDRESS **11945 De Soto Dr.**
CITY-ST-ZIP **Warm Mineral Springs FL 34287**

TITLE **D** ☒ Delete
NAME **CURTIS, JULIUS**
STREET ADDRESS **109 SEGOVIA COURT**
CITY-ST-ZIP **WARM MINERAL SPGS FL**

TITLE **D** ☒ Change ☐ Addition
NAME **Walter Sylvia**
STREET ADDRESS **12312 Suarez St.**
CITY-ST-ZIP **Warm Mineral Springs FL 34287**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Bayer Anna**
STREET ADDRESS **12160 Saragossa**
CITY-ST-ZIP **Warm Mineral Springs FL 34287**

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: **Adam Strobl** **ADAM H. STROBL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APP. 13/01

Date

1-941-426-5116

Daytime Phone #

CR2E037 (10/00)