

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N25106

FILED
Apr 30, 2003
Secretary of State

Entity Name: OCEAN ISLE RUBICAN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALBERT O. SNYDER, JR
4500 SE 5TH PLACE #106
CAPE CORAL, FL 33904 US

New Principal Place of Business:

%PROFESSIONALLY YOURS INC
1342 SE 46TH LANE
CAPE CORAL, FL 33904 US

Current Mailing Address:

4500 SE 5TH PLACE
STE 106
CAPE CORAL, FL 33904 US

New Mailing Address:

%PROFESSIONALLY YOURS INC
PO BOX 100831
CAPE CORAL, FL 33910 US

FEI Number: 65-0058521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, ALBERT O JR
4500 SE 5TH PLACE
#106
CAPE CORAL, FL 33904

Name and Address of New Registered Agent:

CAMPBELL, PHILIP
PROFESSIONALLY YOURS INC
1342 SE 46TH LANE
CAPE CORAL, FL 33904 US

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: PHILIP CAMPBELL

04/30/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: NELSON, GWEN L.
Address: 114 JUMPER LANE
City-St-Zip: WEST CHESTER, PA 19382

Title: PD () Delete
Name: BROWN, RUSSELL
Address: 820 RANCOCAS AVE
City-St-Zip: RIVERSIDE, NJ 08075

Title: TD () Delete
Name: SNYDER, ALBERT O. JR, .
Address: 4500 SE 5TH PLACE, UNIT 106
City-St-Zip: CAPE CORAL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHEIMREIF, STEVEN K
Address: 4500 SE 5TH PLACE #105
City-St-Zip: CAPE CORAL, FL 33904 US

Title: SD (X) Change () Addition
Name: BROWN, DAN R
Address: 4510 SE 5TH PLACE #101
City-St-Zip: CAPE CORAL, FL 33904 US

Title: TD (X) Change () Addition
Name: MITRANO, MARCIA M
Address: 4500 SE 5TH PLACE #204
City-St-Zip: CAPE CORAL, FL 33904 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN SCHEIMREIF

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date