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2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
04-04-2001 90498 050 ****61.25

DOCUMENT # N27957

1. Entity Name

ST. CHRISTOPHER BEACH PROPERTY OWNER'S ASSOCIATI

Principal Place of Business	Mailing Address
~~C/O MARGARET HOCKENHULL~~ ~~2265 ST CHRISTOPHER LANE~~ ~~VERO BEACH FL 32963~~ INDIAN RIVER COUNTY	~~C/O MARGARET HOCKENHULL~~ ALICE ALLEN ~~2265 ST CHRISTOPHER LANE~~ ~~VERO BEACH FL 32963~~ 2280 ST.CHRISTOPHER LANE VERO BEACH, FL. 32963
2. Principal Place of Business ST. CHRISTOPHER LN. Suite, Apt. #, etc.	3. Mailing Address 2280 ST. CHRISTOPHER LN Suite, Apt. #, etc.
City & State VERO BEACH, FL	City & State VERO BEACH, FL.
Zip / Country 32963 /	Zip / Country 32963 / INDIAN RIVER

[redacted]

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE ☐ 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
~~HOCKENHULL, MARGARET~~ ~~2265 ST CHRISTOPHER LANE~~ ~~VERO BEACH FL 32963~~ ALICE ALLEN 2280 ST. CHRISTOPHER LN. VERO BEACH, FL. 32963	Name ALICE ALLEN Street Address (P.O. Box Number is Not Acceptable) 2280 ST. CHRISTOPHER LN. City VERO BEACH FL Zip Code 32963

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 Alice R. Allen 3-31-01

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	PD KOONTA, A.J. 2235 ST. CHRISTOPHER LN. VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ALICE ALLEN 2280 ST. CHRISTOPHER LN. VERO BEACH, FL. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD WALKER, HEPBURN 2235 ST. CHRISTOPHER LN VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD KOONTZ, A.J. 2235 ST. CHRISTOPHER LN, VERO BEACH, FL. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD HOCKENHULL, MARGARET 2265 ST CHRISTOPHER LN VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC,D CALVIT, TANYA 2235 ST. CHRISTOPHER LN VERO BEACH, FL. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS. ALICE ALLEN 2280 ST. CHRISTOPHER LN. VERO BEACH, FL. 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Alice R. Allen REQUIRED 3-31-01 (561) 234-0619

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #