## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED DOCUMENT # N36255** Jan 19, 2000 8:00 am 1. Entity Name **Secretary of State** THE BEACH CLUB CONDOMINIUM ASSOCIATION OF PENSAC 01-19-2000 90231 022 \*\*\*\*61.25 Principal Place of Business Mailing Address C/O REALTY MARTS INT INC C/O REALTY MARTS INTERNATIONAL INC 1591 VIA DELUNA DR 1591 VIA DELUNA DRIVE PENSACOLA BEACH FL 32561 PENSACOLA FL 32561 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2993837 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FADDIS, JOANNE C/O REALTY MARTS INTERNATIONAL INC 1591 VIA DELUNA DR. City Zip Code PENSACOLA BCH. FL 32561 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. TITLE ☐ Change ☐ Addition DP ☐ Delete TITLE NAME NAME MCCAY, BEVERLY STREET ADDRESS STREET ADDRESS 118 VIA DELUNA DR. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA BEACH FL ☐ Addition TITLE □ Delete TITLE NAME WOODBURY, WILLIAM NAME Director STREET ADDRESS STREET ADDRESS 18 VIA DELUNA DR. CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL --- Change ☐ Addition TITLE TITLE ns ☐ Delete NAME NAME FADDIS, JOANNE STREET ADDRESS STREET ADDRESS 1591 VIA DELUNA DR CITY-ST-ZIP CITY-ST-ZIP PENSACOLA BEACH FL Addition Terrence McNally 18 Via Deluna Dr. ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS Pensacola Beach, FL 32561 CITY-ST-7/P CITY-ST-ZIP TITLE □ Delete TITLE Virginia Lunceford NAME NAME 18 via Deluna Dr STREET ADDRESS STREET ADDRESS Pensacola Beach FL 3256 CITY-ST-ZIP CITY-ST-ZIF ☐ Delete Change TITLE Ted Ciano NAME Via Deluna Dr. STREET ADDRESS STREET ADDRESS Pensacola Beach, FL32861 CITY-ST-ZIP 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: ORIGINATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

411-00

850-932*53*19

Davtime Phone #