

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90059 008 ****61.25

DOCUMENT # N45328

1. Entity Name

THE TERRA CEIA CLUB CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

Mailing Address

HARMONY MGMT.
 4400 EL CONQUISTADOR PKWY. #13
 BRADENTON FL 34210

P.O. BOX 10067
 BRADENTON FL 34282

710043



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0758165

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

HAGERTY, JOHN
 HARMONY MGMT.
 4400 EL CONQUISTADOR PKWY. #13
 BRADENTON FL 34210

Name

HARMONY MGMT

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

HARMONY MGMT

4400 EL CONQUISTADOR PKWY # 13

City

BRADENTON

FL

Zip Code

34210

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

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

(NOTE: Registered Agent signature required when reinstating)

1-26-01

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD TONKIN, JAMES <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TONKIN, JAMES	NAME	
STREET ADDRESS	2320 TERRA CIA BAY BLVD #102	STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221	CITY-ST-ZIP	
TITLE	VPD KANYOK, SY <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KANYOK, SY	NAME	
STREET ADDRESS	2320 TERRA CIA BAY BLVD #411	STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221	CITY-ST-ZIP	
TITLE	TD QUEEN, GAYE <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	QUEEN, GAYE	NAME	
STREET ADDRESS	2320 TERRA CIA BAY BLVD #705	STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221	CITY-ST-ZIP	
TITLE	SD LEHRER, DAVID DR. <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEHRER, DAVID DR.	NAME	
STREET ADDRESS	2320 TERRA CIA BAY BLVD #805	STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221	CITY-ST-ZIP	
TITLE	D RICHARDSON, ED <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDSON, ED	NAME	
STREET ADDRESS	2320 TERRA CIA BAY BLVD #112	STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-01 941-761-4254

Date Daytime Phone #

CR2E037 (10/00)