

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000000040

1. Entity Name

BACOPA BAY OWNER'S ASSOCIATION, INC.

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90043 011 \*\*\*\*61.25

Principal Place of Business

Mailing Address

6025 SUN BLVD  
 202  
 ST. PETERSBURG FL 33715  
 US

6025 SUN BLVD  
 202  
 ST. PETERSBURG FL 33715-1107  
 US

2. Principal Place of Business

3. Mailing Address

SEABOARD ARBORS

SEABOARD ARBORS

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1110 PINELLAS BAYWAY # 104

1110 PINELLAS BAYWAY # 104

City & State

City & State

TIERRA VERDE FL

TIERRA VERDE FL

Zip

Country

Zip

Country

33715

US

33715

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3351032

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

THOMAS, DOROTHY  
 6025 SUN BLVD  
 SUITE 202  
 ST. PETERSBURG FL 33715

Name RANDY UNWIN

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

SEABOARD ARBORS

1110 PINELLAS BAYWAY, SUITE 104

City

TIERRA VERDE

FL

Zip Code

33715

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

*Randy Unwin C.A.M. - Randy Unwin*

04/04/00

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 DP  Delete  
 NAME MURRAY, EARL  
 STREET ADDRESS 4953 BACOPA LANE S 605  
 CITY-ST-ZIP ST. PETERSBURG FL 33715

TITLE PD  Change  Addition  
 NAME KAVAN, LYNN  
 STREET ADDRESS 4993 BACOPA LANE S., E-405  
 CITY-ST-ZIP ST. PETERSBURG FL 33715

TITLE VPD  Delete  
 NAME DIAMOND, FRED  
 STREET ADDRESS 4963 BACOPN LANE S 504  
 CITY-ST-ZIP ST. PETERSBURG FL 33715

TITLE YPD  Change  Addition  
 NAME SMITH, JACK  
 STREET ADDRESS 4971 BACOPA LANE S., C-401  
 CITY-ST-ZIP ST. PETERSBURG FL 33715

TITLE D  Delete  
 NAME LANE, JEFFREY  
 STREET ADDRESS 4953 BACOPA LN S  
 CITY-ST-ZIP ST PETERSBURG FL 33715

TITLE SD  Change  Addition  
 NAME GRATZ, EDWARD  
 STREET ADDRESS 4991 BACOPA LANE S., E-202  
 CITY-ST-ZIP ST. PETERSBURG FL 33715

TITLE TD  Delete  
 NAME RUSSELL, GEORGE  
 STREET ADDRESS 4973 BACOPA LANE S 505  
 CITY-ST-ZIP ST PETERSBURG FL 33715

TITLE TD  Change  Addition  
 NAME TERESTANYI, DAN  
 STREET ADDRESS 4983 BACOPA LANE S., D-205  
 CITY-ST-ZIP ST. PETERSBURG FL 33715

TITLE SD  Delete  
 NAME CORBETT, RUTH  
 STREET ADDRESS 4991 BACOPA LANE S 101  
 CITY-ST-ZIP ST PETERSBURG FL 33715

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 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)(l), 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:

*LYNN KAVAN*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00

727-867-1095

Date

Daytime Phone #

CR2E037 (9/99)