2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007188

1. Entity Name

SCIBC NORTH LAND CONDOMINIUM ASSOCIATION, INC.



FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90104 022 ****61.25

				\					
Principal Place of Business 231 S NOKOMIS AVE #A VENICE FL 34285		231 S #A	Mailing Address 231 S NOKOMIS AVE #A VENICE FL 34285			11841/111 010 1010	† (481) (881) (881) (8 81) (881) (881))/	1381 1811 18 9 1
2. Principal Place of Business 3			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		c	City & State			4. FEI Number 65-0888856 Applied For Not Applicable			
Zip Country		Zi	Zip C		y			\$8.75 Additional Fee Required	
6. Name and Address of Current Register			ed Agent	<u> </u>		7. Name and Addre	ss of New Registered A	gent	
			1	Name			_		
STRAMMER, ERIC E 231 S NOKOMIS AVE			The second secon	S S	Street Address	(P.O. Box Number is No	t Acceptable)		·
SUITE A VENICE FL 34285			City			FL	Zip Cod	e	
SIGNATURE .	Signature, typed or printed name of		plicable. (NOTE 9. Election Can Trust Fund C	npaign Finai	~ —	\$5.00 May Be Added to Fees	Make Check		
						Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
10.		ERS AND DIRECTORS		11.	—-т	ADDITIONS/CHANGES	TO OFFICERS AND DIF		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOCH, CHARLES E 436 BAYSHORE DRIV VENICE FL 34285	É	☐ Delete	TITLE NAME STREET AI CITY-ST-	I			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SMETTS, ROBERT 101 POND CYPRESS VENICE FL 34292	ROAD	☐ Delete	TITLE NAME STREET AI CITY-ST-				☐ Change	☐ Addition
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	STRAMMER, ERIC E 231 S NOKOMIS AVE VENICE FL 34285		Delete	NAME STREET AI CITY-ST-	DDRESS	and the second s		Change	Addition (
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HARRISON, BYRON 1482 KEYWAY ROAD ENGLEWOOD FL 342		□ Delete	TITLE NAME STREET AL	1			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AG CITY-ST-				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AU CITY-ST-	l l			☐ Change	Addition

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:

12/03 941-480-01