

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003091

1. Entity Name

PERDIDO SKYE OWNER'S ASSOCIATION, INC.

**FILED**  
**May 02, 2000 8:00 am**  
**Secretary of State**

05-02-2000 90131 040 \*\*\*\*61.25

Principal Place of Business

Mailing Address

113 BAYBRIDGE PROFESSIONAL PARK  
GULF BREEZE FL 32561

113 BAYBRIDGE PROFESSIONAL PARK  
GULF BREEZE FL 32561

2. Principal Place of Business

3. Mailing Address

14620 Perdido Key Dr.

P.O. Box 3147

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Pensacola, FL

Pensacola, FL

Zip  
32507

Country

Zip  
32516

Country

4. FEI Number

59-3396645

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

CAMPBELL, JAMES S  
BEGGS & LANE  
3 W. GARDEN ST., 7TH FLOOR  
PENSACOLA FL 32501

Name

William D. Leib

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

14620 Perdido Key Drive

City

Pensacola

FL

Zip Code

32507

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 *William D. Leib*  
WILLIAM D. LEIB

ASSOCIATION MGR.

4/20/00

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	MACQUEEN, JULIAN B	
STREET ADDRESS	113 BAYBRIDGE PROFESSIONAL PARK	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	PARKER, AL	
STREET ADDRESS	113 BAYBRIDGE PROFESSIONAL PARK	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	WIEGNER, ROGER	
STREET ADDRESS	2889 WHISPER LAKE DRIVE	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bartlett, Homer	
STREET ADDRESS	1721 Pepperell Parkway	
CITY-ST-ZIP	Opelika, AL 36801	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Davis, Liza	
STREET ADDRESS	119 Deerwood Lake Drive	
CITY-ST-ZIP	Harpersville, AL 35078	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	King, Bob	
STREET ADDRESS	6076 Cascade Hill Cove	
CITY-ST-ZIP	Bartlett, TN 38135	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ellis, Sean	
STREET ADDRESS	10008 Spring Ridge Rd	
CITY-ST-ZIP	Terry, MS 39170	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(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: *Homer Bartlett* HOMER BARTLETT, President (850) 456-8592

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)