2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 22, 2001 8:00 am Secretary of State DOCUMENT # N9400003426 1. Entity Name TAMPICO CONDOMINIUM ASSOCIATION, INC. 03-22-2001 90059 034 ****70.00 Mailing Address Principal Place of Business P.O. BOX 2397 930 CAPE MARCO DRIVE MARÇO ISLAND FL 34146 MARCO ISLAND FL 34145 3. Mailing Address 2. Principal Place of Business 930 CAPE MARCO DEIVE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0504173 ARLO IS/AND Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable 930 CAPE MARIO BURT, ED 990 CAPE MRCO DRIVE **UNIT 401** MARCO ISLAND FL 33937 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 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be П Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PRESIDENT Change ☐ Addition TITLE TITLE Delete SAM MAGARINO GLON, DALE NAME NAME 34 CHEYETAE TRAIL STREET ADDRESS STREET ADDRESS 54500 MEADOWBANK LANE CITY-ST-ZIP SPARTA NJ CITY-ST-ZIP **ELKHART IN** SECRETARY - TREASURER Addition Change ST ☐ Delete TITLE TITLE SUE BAUM MAGARINO, SAMUEL NAME 930 CAPE MARCO DRIVE #1501 NAME STREET ADDRESS STREET ADDRESS 34 CHEYENNE TRAIL CITY-ST-ZIP MARLO ISLAND FL CITY-ST-ZIP SPARTA NJ Change Addition TITLE DIRECTOR TITLE Delete DENNIS Albaugh 302 SW NO HINGHAM DR. NAME KESSEL, KARL NAME STREET ADDRESS STREET ADDRESS 930 CAPE MARCO DRIVE #1005 CITY-ST-ZIP ANKENY IA CITY-ST-ZIP MARCO ISLAND FL Addition ☐ Change ☐ Delete TITLE DIRECTOR TITLE HAL EDGAR ALBAUGH, DENNIS NAME 930 CAPE MARCO DRIVE #502 NAME STREET ADDRESS STREET ADDRESS **502 SW NOTTINGHAM DR** CITY-ST-ZIP MARCO ISLAND FL 34145 CITY-ST-ZIP ANKENY IA ☐ Change ☐ Addition ☐ Delete TITLE DIRECTOR. TITLE PREVITI, JOE NAME DE PREVITI NAME 18 DURHAM DEIVE STREET ADDRESS STREET ADDRESS **18 DURHAM DRIVE** CITY-ST-ZIP CITY-ST-ZIP DIX HILLS NY ☐ Addition ☐ Change TITLE TITLE Delete NAME NAME **BELL. ALAN** STREET ADDRESS STREET ADDRESS 3015 CHERRY HILL

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.

CITY-ST-ZIP

SIGNATURE:

MANHATTAN KS 66503

CITY-ST-ZiP

Daytime Phone #