

2001. UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
04-24-2001 90038 008 ****61.25

DOCUMENT # 771081

1. Entity Name

CORAL BREEZE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

506 SW 47TH TERR
CAPE CORAL FL 33914
US

Mailing Address

506 SW 47TH TERR
CAPE CORAL FL 33914
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2529504

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

ZUNINO, AUGUST
CENTURY 21 SUNBELT REALTY
506 SW 47TH TERRACE
CAPE CORAL FL 33914

Name

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

City

FL

Zip Code

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)

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 SD ☒ Delete
NAME ERICKSON, TORY
STREET ADDRESS 4616 SE 6TH AVE., STE. 102
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE VPD ☒ Change ☐ Addition
NAME ERICKSON, TORY
STREET ADDRESS 4616 SE 6th AVE., STE 102
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE VD ☒ Delete
NAME MACLEAN, JAMES
STREET ADDRESS 4616 SE 6TH AVE #201
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME MUELLER, DENISE
STREET ADDRESS 4616 SE 6TH AVE STE 104
CITY-ST-ZIP CAPE CORAL FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME KING, JANE
STREET ADDRESS 4616 SW 6TH AVE, 103
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE TSD ☒ Change ☒ Addition
NAME KING, JANE
STREET ADDRESS 4616 SW 6th AVE, 103
CITY-ST-ZIP CAPE CORAL, FL33914

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(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

Date

Daytime Phone #

4-5-01

CR2E037 (10/00)