

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N16730

FILED
Feb 11, 2002 8:00 AM
Secretary of State

Entity Name: 5282 95TH STREET NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5282 95TH ST. N.
UNIT #5
ST. PETERSBURG, FL 33708

New Principal Place of Business:

Current Mailing Address:

5282 95TH ST. N.
UNIT #5
ST. PETERSBURG, FL 33708

New Mailing Address:

FEI Number: 59-2877527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN MAHON
5282 95TH STREET N.
#2
ST. PETERSBURG, FL 33708 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAHAN, NORMAN,
Address: 5282 95TH ST. N.
City-St-Zip: ST. PETERSBURG, FL

Title: TD () Delete
Name: ERCHENBERG, CHARLES
Address: 5282 95TH STREET N
City-St-Zip: ST. PETERSBURG, FL

Title: SD () Delete
Name: HAMILTON, EVELYN
Address: 5282 95TH ST. N.
City-St-Zip: ST. PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANTHONY SABBA,
Address: 5282 95TH ST. N.
City-St-Zip: ST. PETERSBURG, FL 33708

Title: TD (X) Change () Addition
Name: SAUL, JAMES J
Address: 5282 95TH STREET N
City-St-Zip: ST. PETERSBURG, FL 33708

Title: SD (X) Change () Addition
Name: SPAETH, DEBBIE
Address: 5282 95TH ST. N.
City-St-Zip: ST. PETERSBURG, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY SABBA

PD

02/11/2002

Electronic Signature of Signing Officer or Director

_____ Date