

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90377 021 ***150.00

DOCUMENT # P98000025119

1. Entity Name

Eastwood Condominium Management, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1380 Gulf Blvd.

3. Mailing Address
1380 Gulf Blvd.

Suite, Apt. #, etc.
Sand Key Club #1106

Suite, Apt. #, etc.
Sand Key Club #1106

City & State
Clearwater, FL

City & State
Clearwater, FL

Zip Country
33767-2822 USA

Zip Country
33767-2822 USA

4. FEI Number
59-3505286

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

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7. Name and Address of Current Registered Agent

Name
Irene J. Eastwood

Street Address (P.O. Box Number is Not Acceptable)
4036 Chesterfield Drive

City Zip Code
Spring Hill FL 34609

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 *Irene J. Eastwood* Irene J. Eastwood

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 4/11/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D/P
NAME Irene J. Eastwood
STREET ADDRESS 4036 Chesterfield Drive
CITY - ST - ZIP Spring Hill, FL 34609

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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE *Irene J. Eastwood* Irene J. Eastwood 4/11/02 (352) 684-7767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #