2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State
02-06-2003 90052 042 ****61.25

DOCUMENT # N01411

1. Entity Name
ISLA KEY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~100 CLEVELAND AVE. SW~~ ~~LARGO FL 33770~~ US	~~100 CLEVELAND AVE. SW~~ ~~LARGO FL 33770~~ US

CHECK HERE IF MAKING CHANGES ☐

2. Principal Place of Business	3. Mailing Address
7300 PARK ST.	7300 PARK ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SEMINOLE, FL	City & State: SEMINOLE, FL
Zip: 33777 Country: USA	Zip: 33777 Country: USA

4. FEI Number 59-2562971 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

THOMAS, DOROTHY
~~100 CLEVELAND AVE. SW~~
~~LARGO FL 33770~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
7300 PARK ST.

City SEMINOLE FL Zip Code 33777

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Dorothy Thomas 1/27/03
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BIGLER, DICK 5279 ISLA KEY BLVD #314 ST. PETERSBURG FL 33715	☒ Delete	P LUNDELL, PHIL 5279 ISLA KEY BLVD. #213 ST. PETERSBURG, FL. 33715	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CASEY, GEN 5155 ISLA KEY BLVD., #403 ST. PETERSBURG FL	☒ Delete	TD GIBBS, PAUL 5155 ISLA KEY BLVD. #406 ST. PETERSBURG, FL. 33715	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD VECHIONNE, JOE 181 OVERLOOK AVE BELLEVILLE NJ 07109	☐ Delete	D VECCHIONE, JOE 181 OVERLOOK AVE. BELLEVIEW, NJ 07109	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KEETON, KELLY 5281 ISLA KEY BLVD UNIT 303 ST. PETERSBURG FL 33715	☒ Delete	SD JAMES, JESSE 5279 ISLA KEY BLVD. #214 ST. PETERSBURG, FL 33715	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARASA, JOHN 5151 ILA KEY BLVD. #219 SAINT PETERSBURG FL 33715	☐ Delete	VP ARASA, JOHN 5161 ISLA KEY BLVD. #219 ST. PETERSBURG, FL 33715	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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: Phillip A. Lundell 1/27/03 727-581-2662
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #