

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 706258

1. Entity Name

SINGER ISLAND BUSINESS ASSOCIATION, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90023 030 ****61.25

Principal Place of Business

1281 NORTH OCEAN DR
STE 109
SINGER ISLAND FL 33404
US

Mailing Address

1281 NORTH OCEAN DR
STE 109
SINGER ISLAND FL 33404-4739
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

59-6159379

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

STEWART, JAMES M.
1211 THE PLAZA
SINGER ISLAND FL 33404

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 ☒ D
NAME SCHNYER, DAVID
STREET ADDRESS 2631 PARK AVE
CITY-ST-ZIP SINGER ISLAND FL 33404 ☐ Delete

TITLE ☒ D
NAME JAMES M. STEWART
STREET ADDRESS 1211 THE PLAZA
CITY-ST-ZIP SINGER ISLAND, FL 33404 ☐ Change ☒ Addition

TITLE ☒ D
NAME MOODY, GOLDIE
STREET ADDRESS 182 LAKE DR
CITY-ST-ZIP SINGER ISL FL 33404 ☐ Delete

TITLE ☒ D
NAME THOMAS R. MILLS
STREET ADDRESS 176 LAKE DRIVE
CITY-ST-ZIP PALM BEACH SHORES, FL 33404 ☐ Change ☒ Addition

TITLE ☐ D
NAME HOHENSTEIN, BRUCE
STREET ADDRESS 3700 N OCEAN DR
CITY-ST-ZIP SINGER ISL FL 33404 ☐ Delete

TITLE ☒ D
NAME STEPHEN A. KAPPELER
STREET ADDRESS 3200 OCEAN AVE
CITY-ST-ZIP SINGER ISLAND, FL 33404 ☐ Change ☒ Addition

TITLE ☒ D
NAME DEVITO, ENZA
STREET ADDRESS 1217 N OCEAN DR
CITY-ST-ZIP SINGER ISL FL ☒ Delete

TITLE ☒ D
NAME GAYLE AMELHE
STREET ADDRESS 206 INLET WAY
CITY-ST-ZIP PALM BEACH SHORES, FL 33404 ☐ Change ☒ Addition

TITLE ☒ D
NAME ROBERTS, LEE
STREET ADDRESS 990 E BLUE HERON BLVD
CITY-ST-ZIP SINGER ISLAND FL 33404 ☒ Delete

TITLE ☒ D
NAME JO EVANS
STREET ADDRESS 151 OCEAN AVE
CITY-ST-ZIP PALM BEACH SHORES FL 33404 ☐ Change ☒ Addition

TITLE ☐ D
NAME MOODY, JAMES
STREET ADDRESS 182 LAKE DR
CITY-ST-ZIP SINGER ISLAND FL 33404 ☐ Delete

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/27/00 561-842-2477