

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

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90162 033 \*\*\*\*61.25

**DOCUMENT # 706258**

1. Entity Name

**SINGER ISLAND BUSINESS ASSOCIATION, INC.**



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  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

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

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SCHNYER, DAVID</b> <b>2631 PARK AVE</b> <b>SINGER ISLAND FL 33404</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>X</b> <b>D</b> <b>MOODY, GOLDIE</b> <b>182 LAKE DR</b> <b>SINGER ISL FL 33404</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>SUNDEEN, DEBBIE</b> <b>3800 N OCEAN DRIVE</b> <b>SINGER ISLAND FL 33404</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>STEWART, JAMES M</b> <b>1211 THE PLAZA</b> <b>SINGER ISLAND FL 33404</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>D</b> <b>AMECHE, GAYLE</b> <b>206 INLET WAY</b> <b>PALM BEACH SHORES FL 33404</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MOODY, JAMES</b> <b>182 LAKE DR</b> <b>SINGER ISLAND FL 33404</b>	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>S</b> <b>Chip Armstrong</b> <b>c/o Salfish Marina &amp; Resort</b> <b>98 Lake Drive, PBS, FL 33404</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Goldie Moody</b> <b>182 Lake Drive</b> <b>Singer Island, FL 33404</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>D</b> <b>Gayle Ameche</b> <b>206 Inlet Way</b> <b>Palm Beach Shores, FL 33404</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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*

2/6/03

561-842-1215

CR2E037 (10/02)