2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
05-10-2001 90136 015 ****61.25

DOCUMENT # 710260

1. Entity Name

SEA CASTLE ASSOCIATION INC.

Principal Place of Business	Mailing Address
1001-1019 SEASIDE DRIVE SARASOTA FL 34242	1001-1019 SEASIDE DRIVE SARASOTA FL 34242

[redacted]

DO NOT WRITE IN THIS SPACE

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 59-0830089 ☐ 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
NELSON, DALE 1003 SEASIDE DRIVE SARASOTA FL 34242	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 Dale Nelson Dale Nelson Feb 8, 2001
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VP~~ ~~RYAN, PENNY~~ [redacted]ee ~~1011 SEASIDE DR~~ ~~SARASOTA FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	David Magee Secretary 1011 Seaside Dr Sarasota, FL 34242	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P~~ President ~~THOM, NELSON~~ Dale Nelson 1003 SEASIDE DR SARASOTA FL 34242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Leslie McMahon 1019 Seaside Dr Sarasota, FL 34242 Vice President	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARRISON, CLARK 1015 SEASIDE DR SARASOTA, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Orville Clark 1013 Seaside Dr Sarasota, FL 34242	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ AMAN, WILLIAM 1001 SEASIDE DRIVE SARASOTA, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PASKET, IRMGARD 1019 SEASIDE DR SARASOTA, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RASH, LILLIAN S 1009 SEASIDE DR SARASOTA, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Dale Nelson REQUIRED Dale Nelson Feb 8, 2001 941 349-2595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #