2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

FILED May 05, 2000 8:00 am Secretary of State DOCUMENT # **716303** 1. Entity Name SOUTH SEA ISLANDER, INC. A CONDOMINIUM 05-05-2000 90058 026 ****61.25 Principal Place of Business Mailing Address 5710 S. DIXIE-HWY-#A 231 E LANTANA RD LANTANA FL 33462 W.P.B.-FL 33485 2125 2. Principal Place of Business 3. Mailing Address 3700 Georgia Ave. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1237357 Not Applicable West Palm Beach FL Zip Country Zip33405 Country \$8.75 Additional 5. Certificate of Status Desired П US Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TOUCHSTONE WEBB MGMNT 37000 Georgia Ave. SALATA, KATHLEEN WEBB 5710 S DIXIE HWY STE A West Palm Beach Zip Code 33405 WPB FL 33405 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Pavable to 9. Election Campaign Financing FILE NOW: **\$5.00** May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition **VPD** TITLE ☐ Delete TITLE NAME NAME SIREN, PENTTI STREET ADDRESS STREET ADDRESS 231 E LANTANA RD #504 CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Addition TITLE PD ☐ Delete TITLE Change NAME CROMIE, JUDITH NAME STREET ADDRESS STREET ADDRESS 231 E LANTANA RD, UNIT 601 CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 TITLE ☐ Delete TITLE Change Addition m NAME KENNEDY, MARION STREET ADDRESS STREET ADDRESS 231 E LANTANA RD, UNIT 501 CITY-ST-ZIP CITY-ST-ZIP lantana FL 33462 ☐ Delete TITLE Change ☐ Addition TIT! F NAME FONTI, AGNES NAME STREET ADDRESS STREET ADDRESS 231 E LANTANA RD, UNIT 703 CITY-ST-ZIP CITY-ST-7IP l<u>antana f</u>l 33462_. Change X Addition TITLE TITLE VPD WELLER, CLIFFORD NAME Sinclair, Sus'an NAME STREET ADDRESS STREET ADDRESS 231 E LANFANA RD, UNIT 505 231 E. Lantana Rd. #401 CITY-ST-ZIP CITY-ST-7IP Lantaña Fl 33462 <u>antana FL 33462</u> ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

RION J. KENNEDY