FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State **DOCUMENT # 723960** 1. Entity Name DOLPHIN TOWERS CONDOMINIUM ASSOCIATION, INC. 25-2001 90063 034 ****61.25 Principal Place of Business Mailing Address 101 S GULFSTREAM AVE 101 S GULFSTREAM AVE SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1429696 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FARR, JANIS K Street Address (P.O. Box Number is Not Acceptable) 101 S GULFSTREAM AVE **DOLPHIN TOWER OFFICE** SARASOTA FL 34236 City 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: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Addition NAME PAGAN, CAROL NAME STREET ADDRESS 101 S GULFSTREAM AVE #10-D STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 TITLE ☐ Delete TITLE Change Addition NAME LEINBERGER, CARL NAME STREET ADDRESS 101 S GULFSTREAM AVE #14-K STREET ADDRESS CITY-ST-7IP CITY-ST-7IP SARASOTA FL 34236 TITLE ☐ Delete TITLE ___ Addition WILLIAMSON, CHRISTINE NAME NAME STREET ADDRESS 101 S GULFSTREAM AVE #15-K STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SARASOTA FL 34236 D TITLE **■**Delete TITLE Addition SPANGLER, REYNOLD NAME NAME STREET ADDRESS 101 S GULFSTREAM AVE #4-F STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP SARASOTA FL 34236 TITLE D ☐ Delete TITLE Change ☐ Addition RAETZ, CHRISTOPHER NAME NAME STREET ADDRESS 101 S GULFSTREAM AVE #9-A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

4/19/01 941-366-520

Daytime Phone 4