

2001 UNIFORM BUSINESS REPORT (UBR)

3/3

FILED

Apr 19, 2001 8:00 am
Secretary of State

03-30-2001 90321 011 ****61.25

DOCUMENT # 725814

1. Entity Name

SMUGGLERS COVE PROPERTY OWNERS' ASSOCIATION, INCOR

Principal Place of Business

Mailing Address

P.O. BOX 3794
VERO BEACH FL 32963

P O BOX 3794
VERO BEACH FL 32964
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

59-1513320

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, WILLIAM J.
3355 OCEAN DRIVE
VERO BEACH FL 32963

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	☒ Delete
NAME	KIRHENDALL, HENRY	
STREET ADDRESS	1516 SMUGGLERS COVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	S	☐ Delete
NAME	CROWLEY, BETH	
STREET ADDRESS	1531 SMUGGLERS COVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	FV	☐ Delete
NAME	SIGLER, ENNA	
STREET ADDRESS	1560 SMUGGLERS COVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	PD	☒ Delete
NAME	CHILBERG, JOHN	
STREET ADDRESS	1555 SMUGGLERS COVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	SV	☒ Delete
NAME	TOMASETTI, PAT	
STREET ADDRESS	1480 SMUGGLERS COVE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	T	☒ Delete
NAME	GARRISON, CAROLYN	
STREET ADDRESS	1541 SMUGGLERS COVE	
CITY-ST-ZIP	VERO BEACH FL	

TITLE	Tom Hayes - FV	☐ Change ☒ Addition
NAME	1550 Smugglers Cove	
STREET ADDRESS	VERO BEACH, FL 32963	
CITY-ST-ZIP		
TITLE	CROWLEY, BETH - PD	☒ Change ☐ Addition
NAME	1531 Smugglers Cove	
STREET ADDRESS	VERO BEACH, FL 32963	
CITY-ST-ZIP		
TITLE	SIGLER, ENNA - S	☐ Change ☐ Addition
NAME	1560 Smugglers Cove	
STREET ADDRESS	VERO BEACH, FL 32963	
CITY-ST-ZIP		
TITLE	Patrick Ridge - SV	☐ Change ☒ Addition
NAME	1571 Smugglers Cove	
STREET ADDRESS	VERO BEACH, FL 32963	
CITY-ST-ZIP		
TITLE	Marcia Lisak, T	☐ Change ☒ Addition
NAME	1526 Smugglers Cove	
STREET ADDRESS	VERO BEACH, FL 32963	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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:

MARCIA V. LISAK 3/26/01 (361) 234-6224

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)