FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Feb 09, 2001 8:00 am **DOCUMENT # 726495** Secretary of State 1. Entity Name BAYTREE, A CONDOMINIUM, SECTION FOUR, INC. 02-09-2001 90216 037 \*\*\*\*61.25 Principal Place of Business Mailing Address 423-17 SHEOAH BLVD. 423-17 SHEOAH BLVD. WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 2. Principal Place of Business 3. Mailing Address AS ABOVE SAME AS ABOVE SAME Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1487470 Not Applicable Zip Country 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 -Street Address (P.O. Box Number is Not Acceptable) KOSS, MARY LOUISE 423-17 SHEOAH BLVD. WINTER SPRINGS FL 32768 Zip Code City 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD Delete TITLE Change TITLE ☐ Addition O. KOURKE 423:17 SheoALBLUd NAME MINANA, JAMES R NAME STREET ADDRESS 423-18 SHEOAH BLVD. STREET ADDRESS WINTER SPRINGS FL 32708 CITY-ST-ZIP CITY-ST-ZIP WINTER SPRINGS FL 32708 Addition **VPD** X Delete ☐ Change TITLE TITLE Rudolph Stiler STROKER, HOWARD 427-33 ShEOAL BLUD NAME NAME STREET ADDRESS 423-9 SHEOAH BLVD. STREET ADDRESS WINGER SPRINGS FL 32708 CITY-ST-ZIP CITY-ST-ZIP WINTER SPRINGS FL 32708 **Addition** ☐ Change TITLE Delete TITLE HAROLD TAQUE 427-87 SheOAL BLUD KOSS. MARY LOUISE NAME NAME STREET ADDRESS STREET ADDRESS 423-17 SHEOAH BLVD. WINTER SPRINGS FL 32708 CITY-ST-ZIP CITY-ST-ZIP WINTER SPRINGS FL 32708 Delete TITLE ☐ Change ☐ Addition TITI F O'ROURKE, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 423-19 SHEOAH BLVD. CITY-ST-ZIP CITY-ST-ZIP WINTER SPRINGS FL 32708 ☐ Addition ☐ Delete TITI F ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

SIGNATURE

SATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

15/01 407-327

Daytime Phone #