2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State
02-26-2002 90092 028 ****61.25

DOCUMENT # 729393

1. Entity Name

LOWER MATECUMBE BEACH PROPERTY OWNERS ASSOCIATIO N, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 1497 ISLAMORADA FL 33036 US	PO BOX 1578 KEY LARGO FL 33037 US

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 23-7372956 ☐ 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
OVERFIELD, RICHARD 116 PLANTATION SHORES DR TAVERNIER FL 33070	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P DOUTHTERY, BRAD 163 IROQUOIS DR ISLAMORADA FL 33036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Richard HANSON 107 Iroquois DR Islamorada, FL 33036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BAXTER, DONALD 121 SUNSET DR ISLAMORADA FL 33036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Mike HAINES 176 Iroquois DR Islamorada, FL 33036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BADGETT, SUE 114 SUNSET DR ISLAMORADA FL 33036	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Richard MANNING 256 SUNSET DR Islamorada FL 33036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLACK, LOUISA 133 SUNSET DR ISLAMORADA FL 33036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bobbe DOOLEY 205 SUNSET DR Islamorada, FL 33036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MYERS, JOHN 269 SUNSET DR ISLAMORADA FL 33036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gary Nichols 153 Iroquois DR Islamorada, FL 33036	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PFEIFER, BETTY 95 SUNSET DR ISLAMORADA FL 33036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Richard Hanson REQUIRED 2/10/02 305-664-4041