2000 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2000 8:00 am Secretary of State **DOCUMENT # 729915** 1. Entity Name BREEZY POINT CONDOMINIUM, INC. 04-18-2000 90225 018 ****61.25 Principal Place of Business Mailing Address C/O RESORT MGMT P O BOX 2244 MARCO ISLAND FL 34146-2244 834 BALD EAGLE DRIVE AUU4U933 MARCO ISLAND FL 33937 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1604950 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired П 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) YACONO, RICK RESORT MANAGEMENT 834 BALDEAGLE DR Zip Code City FL MARCO ISLAND FL 34145 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 Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition Delete TITLE TITLE DAMRON, JO 3518 CaveHill Pl. JOY, JACK NAME NAME STREET ADDRESS 11719 CANDIZ RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAMBRIDGE OH Lexington, KY 40513-1080 Change ☐ Addition Delete TITLE TITLE Lauber, Wendell SHIVELY, PHYLLIS NAME NAME 1109 Road L. STREET ADDRESS STREET ADDRESS **464 VAN CAMP SQUARE** CITY-ST-ZIP ---CITY-ST-ZIP __ GREENWOOD IN -<u>Geneva: NE 68361-3103 -</u> Change ☐ Addition TITLE ☐ Delete TITLE MCLEAN, BARBARA NAME NAME P.O. BOX 342 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WHITEFIELD NM 03598 ☐ Change ☐ Addition TITLE ☐ Delete TITLE **BRITTAIN JOHN** NAME NAME STREET ADDRESS STREET ADDRESS 8355 BEACON HILL CITY-ST-ZIP CITY-ST-ZIP CINCINNATI OH ☐ Addition ☐ Delete TITLE Change TITLE CASEY, JACK NAME NAME STREET ADDRESS STREET ADDRESS 880 HURON CT #107 CITY-ST-ZIP CITY-ST-ZIP MARCO ISLAND FL Change ☐ Addition TITI F TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

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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