2000 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE:

FILED DOCUMENT # 733360 Mar 03, 2000 8:00 am 1. Entity Name **Secretary of State** SEA ISLE CONDOMINIUM ASSOCIATION, INC. 03-03-2000 90194 027 ****61.25 Principal Place of Business Mailing Address P. O. BOX 510151 1101 W. OCEAN DRIVE KEY COLONY BEACH FL 33051-0151 P.O.BOX 151 KEY COLONY BEACH FL 33051 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2252200 Not Applicable Country \$8.75 Additional Zip Country 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) PIERCE, CHARLOTTE S 8042 PORPOISE DR MARTHON FL 33051 Zip Code City FL 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Addition Delete TITLE Change TITLE TD Arz baecher س، ۱۱، مس NAME NAME LYNCH, JEANNE CR2E037 STREET ADDRESS STREET ADDRESS 1101 Oces 1101 OCEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP eyColony KEY COLONY BEACH FL Addition Delete Change TITLE TITLE VD NAMÉ NAME SENDECKI, MARTIN STREET ADDRESS STREET ADDRESS 1101 OCEAN DRIVE CITY-ST-ZIP CITY-ST-ZIE KEY COLON BEACH FL Addition TITLE Delete TITLE SD^ NAME NAME THOMAS, SHARON STREET ADDRESS STREET ADDRESS 1101 OCEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP KEY COLONY BEACH FL ☐ Change Addition TITLE **Delete** TITLE NAME NAME PINNOW, KORY STREET ADDRESS STREET ADDRESS 1101 OCEAN DR W CITY-ST-ZIP CITY-ST-ZIP KEY COLONY BEACH FL 33057 3 ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Change □ Delete TITI F TITLE 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

12000

Date