

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State
 03-25-2002 90136 037 ****61.25

DOCUMENT # 737507

1. Entity Name

MOON BAY CONDOMINIUM, INC.

Principal Place of Business

**104350 OVERSEAS HWY
 KEY LARGO FL 33037**

Mailing Address

~~8299 CORAL WAY
 MIAMI FL 33155~~

**SAME AS
 BUSINESS**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1797593

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**BECKER, POLIAKOFF & STREITFELD, P.A.
 1450 MADRUGA AVE SUITE 300
 CORAL GABLES FL 33146**

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	PD	☒ Delete
NAME	KNAPP, PAUL	
STREET ADDRESS	P.O. BOX 100618	
CITY-ST-ZIP	FL LAUDERDALE FL 33310	
TITLE	SD	☒ Delete
NAME	KING, ROBERT	
STREET ADDRESS	104350 OVERSEAS HWY #TH-15	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	VPD	☒ Delete
NAME	ECHENIQUE, LUIS	
STREET ADDRESS	5900 SW 100 ST 8-204	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	PD	☒ Delete
NAME	KING, ROBERT	
STREET ADDRESS	41 SW 132 CT	
CITY-ST-ZIP	MIAMI FL 33184	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	BEVERLY HOOPER	
STREET ADDRESS	P.O. BOX 8461	
CITY-ST-ZIP	KEY LARGO, FL 33037	
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	RODOLFO PEREZ	
STREET ADDRESS	4821 S.W. 15th AVE	
CITY-ST-ZIP	MIAMI, FL 33185	
TITLE	SECRETARY	☒ Change ☐ Addition
NAME	ROBERT KING	
STREET ADDRESS	104350 O.S.H TH-15	
CITY-ST-ZIP	KEY LARGO, FL 33037	
TITLE	TREASURER	☒ Change ☐ Addition
NAME	DONALD SCHLEBEL	
STREET ADDRESS	18904 S. 113th AVE	
CITY-ST-ZIP	MOKENA, IL 60448	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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: X

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-02

305-451-0186

Date

Daytime Phone #

CR2E037 (9/01)