2002 UNIFORM BUSINESS REPORT (UBR)

Feb 20, 2002 8:00 am **DOCUMENT # 738251 Secretary of State** 02-20-2002 90129 017 ****61.25 BAY ISLES BAYOU ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 8036 P.O. BOX 8036 LONGBOAT KEY FL 34228 LONGBOAT KEY FL 34228 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1797525 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) COOPER, MARTIN 3140 BAYOU SOUND **LONGBOAT KEY FL 34228** City 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. **S]GNATURE** Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DP ☐ Addition TITI F ☐ Delete TITLE ☐ Change KLOPSTAD, JACK NAME NAME STREET ADDRESS STREET ADDRESS 3271 BAYOU SOUND CITY-ST-ZIP CITY-ST-ZIP LONGBOAT KEY FL 34228 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME COOPER, MARTIN NAME STREET ADDRESS STREET ADDRESS 3140 BAYOU SOUND CITY-ST-ZIP CITY-ST-ZIP LONGBOAT KEY FL 34228 TITLE . ☐ Change Addition ☐ Delete TITLE NAME RIVINIUS, FORREST STREET ADDRESS 3631 BAYOU CIR STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY FL 34228 CITY-ST-ZIP ☐ Addition TITI E ☐ Delete WEENICK, BURT NAME NAME STREET ADDRESS 3580 BAYOU SOUND STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY FL 34228 CITY-ST-ZIP DT Delete ☐ Change ☐ Addition TITLE NAME KENNEDY, SAM NAME STREET ADDRESS 3291 BAYOU SOUND STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LONGBOAT KEY FL 34228 Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 "egiver 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.

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

CITY-ST-7IP

REDack Klopstad 02/05

941-383-0000 Davtime Phone # (9/01)