

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 28, 2002 8:00 am**  
**Secretary of State**

02-24-2002 90019 007 \*\*\*\*61.25

**DOCUMENT # 738502**

1. Entity Name

**SUNBOW BAY ASSOCIATION, INC.**

Principal Place of Business

P.O. BOX 10067  
 BRADENTON FL 34282  
 US

Mailing Address

P.O. BOX 10067  
 BRADENTON FL 34282  
 US

2. Principal Place of Business

**4400 El Conquistador**  
 Suite, Apt. #, etc.

3. Mailing Address

**4400 El Conquistador**  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

**Bradenton FL**

City & State

**Bradenton FL**

4. FEI Number

**59-1762555**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HARMONY MANAGEMENT**  
**4400 EL CONQUISTADOR PKWY**  
**BRADENTON FL 34282**

7. Name and Address of New Registered Agent

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

TITLE **STORM, CAROL** ☐ Delete  
 NAME  
 STREET ADDRESS **3801 E BAY DR #104**  
 CITY-ST-ZIP **HOLMES BEACH FL**

TITLE **WOOD, STEPHEN** ☒ Delete  
 NAME  
 STREET ADDRESS **3705 E. BAY DR.**  
 CITY-ST-ZIP **HOLMES BEACH FL**

TITLE **LONGBURY, BILL** ☐ Delete  
 NAME  
 STREET ADDRESS **3805 EAST BAY DR. #211**  
 CITY-ST-ZIP **BRADENTON BEACH FL 34217**

TITLE **RAYMOND, VIOLA** ☒ Delete  
 NAME  
 STREET ADDRESS **3705 E BAY DRIVE UNIT 108**  
 CITY-ST-ZIP **HOLMES BEACH FL**

TITLE **JAUTZ, ERIC** ☐ Delete  
 NAME  
 STREET ADDRESS **3805 E BAY DR. #203**  
 CITY-ST-ZIP **BRADENTON BEACH FL 34217**

TITLE **CAPO, VINCE** ☐ Delete  
 NAME  
 STREET ADDRESS **3705 EAST BAY DR. #216**  
 CITY-ST-ZIP **HOLMES BEACH FL 34217**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **Dennis Rose** ☐ Change ☒ Addition  
 NAME  
 STREET ADDRESS **3701 East Bay Drive 4-B**  
 CITY-ST-ZIP **Holmes Bch FL 34217**

TITLE **Dir** ☐ Change ☒ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **Ismael Amaro** ☐ Change ☒ Addition  
 NAME  
 STREET ADDRESS **2604 13 Waterford Way**  
 CITY-ST-ZIP **Palmetto FL 34221**

TITLE **Dir** ☐ Change ☒ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **Dir** ☒ 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/7/02 (941) 776-3585**

CR2E037 (9/01)