## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 738502**

1. Entity Name

SUNBOW BAY ASSOCIATION, INC.



## **FILED** Aug 18, 2003 8:00 am secretary of State

08-18-2003 90175 010 \*\*\*\*61.25

				1	TAS					
Principal Plac	ce of Business		Mailing Address			]				
3801 E. BAY DRIVE			3801 E. BAY DRIVE			<u>'</u>	UNTOTATE			
HOLMES BEAC	CH FL 34217		HOLMES BEACH FL 34217	مىمد						
			% Hames	Ban Pr	<u>w</u> Ma					
Principal Place of Business     3. Mailing Address			16107		]	18101 81111 10110 1101 01011 1	iisii aani ilah 640			
Suite, Apt. #, etc. Suite, Apt. #, etc.			1467		) 	EON LICOS IS MAIN	10 011441050			
Suite, Apr. #, etc.						ECK HERE IF MAKIN	NG CHANGES			
City & State City & State			- CI		4. FEI Number 59-1762555		<del>                                      </del>	plied For		
Zip	· · ·	Country	tolmes co	Country					t Applicable	
ΣIÞ		Codrilly	34218	1 SA		5. Certificate of Statu	us Desired	\$8.75 Add Fee Required		
	6. Name	and Address of Current F	Registered Agent			7. Name and Addre	ss.of.New.Registere	d Agent		
				Name	:					
HOLMES BEACH PROPERTY MANAGEMENT				Stree	Street Address (P.O. Box Number is Not Acceptable)					
1007 83RD STREET, NW BRADENTON FL 34209				<del>-</del>						
ORAULIN	ION FL 3420	J <del>9</del>		City				- 175 C-4		
				City			F	L Zip Code	<u> </u>	
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. I am familiar with, and accept the obligations of registered agent.										
(rie obliga	illoris orregiste	eu agent.							Ì	
SIGNATURE	*									
0.0.0.0.12	Signature, typed o	r orinted name of registered agent a	nd title if applicable. (NOTE:	Registered Agent sig	nature required	when reinstating)	- DATE		}	
FILE NOW: FEE IS \$61.25  After September 10, 2003, min will be \$236.25  9. Election Campaign Financing Trust Fund Contribution.  9. Election Campaign Financing Added to Fees  Solution Campaign Financing Added to Fees  Make Check Payable to Florida Department of State										
10.		OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTORS IN	10	
TITLE	P  STORM, CA	.p∩i	☐ Delete	TITLE	1			☐ Change	Addition	
NAME STREET ADDRESS	3801 E BA			NAME STREET ADDRES	, l					
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STREET ADDRESS		BAY DR. #211		STREET ADDRES	380	DI EASTOR	M DR #2	209		
CITY-ST-ZIP		N BEACH FL 34217		CITY-ST-ZIP	1 HO	LLES BO	H EL 34	1217	[	
TITLE	D		☐ Delete	TITLE				Change	☐ Addition	
NAME	AMARO, ISI			NAME						
STREET ADDRESS CITY-ST-ZIP	PALMETTO	ATERFORD WAY		STREET ADDRES CITY-ST-ZIP	5					
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OTEL			☐ Dalata		CTT	5		('hanne		
NAME	) "	С	☐ Oelete	TITLE NAME	STU	ハイフ デクリン	٠	Change	Addition )	
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	JAUTZ, ERI 3805 E BAY		Oelete	NAME	1380	ハイフ デクリン	N De + 2	യ്ട	Addition	
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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:

ONORON

941) 779-2273

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