## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # 739272** Apr 29, 2002 8:00 am Secretary of State BAY PALMS CONDOMINIUM ASSOCIATION, INC. 04-29-2002 90042 011 \*\*\*\*61.25 Principal Place of Business Mailing Address C/O BUXTON PROPERTIES, INC. C/O BUXTON PROPERTIES, INC. 147 BELCHER RD. STE 2 147 BELCHER RD.STE 2 LARGO FL 34641 **LARGO FL 34641** 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 59-1387550 Not Applicable Zip Country Zip 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. BUXTON, BRIAN Street Address (P.O. Box Number is Not Acceptable) C/O BUXTON PROPERTIES, INC. 147 N. BELCHER RD, SUITE 2 LARGO FL 33771 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Change Addition (9/01 HONAGHAN HONAGHAN, SHIRLEY NAME NAME 2750 E. BAY DR. # C-14 STREET ADDRESS | 2750 E. BAY DRIVE, #C-14 STREET ADDRESS CITY-ST-ZIP LARGO FL 33771 CITY-ST-7IP TITLE TITLE Change SICKLER, ALIS A MURON DRESLINGILI NAME NAME 2750 E. BAY DRIVE, #C-1 STREET ADDRESS STREET ADDRESS LARGO\_FL,33771. CITY-ST-ZIP CITY-ST-ZIP STD ☐ Delete Change ☐ Addition COLLINS, CLIFF NAME NAME 2750 E BAY DR. A-6 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Largo FL CITY-ST-ZIP TITLE Delete TITLE Change Addition MARY GITAND 2750 E. BAY DR. F5 HARTIGAN. SARAH NAME NAME 2750 E BAY DR E-3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LARGO FL 33771 CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition KELLY, VICTOR NAME NAME 2750 E BAY DR A-14 STREET ADDRESS STREET ADDRESS CITY-ST-7IP Largo FL 33771 CITY-ST-ZIP Delete TITLE ☐ Change **Addition** AGLIANO, FRANK NAME NAME 2750 E. BAY DRIVE, #E-1 STREET ADDRESS STREET ADDRESS BAY DR. LARGO FL 33771 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

other like empowered

TED NAME OF SIGNING OFFICER OF DIRECTOR