

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 739506

1. Entity Name

CAXAMBAS TOWER CONDOMINIUM ASSOCIATION, INC.

FILED

May 19, 2002 8:00 am
Secretary of State

05-19-2002 90221 002 ****61.25

Principal Place of Business

1036 S COLLIER BLVD
MARCO ISLAND FL 34145
US

Mailing Address

PO BOX 363
MARCO ISLAND FL 34146
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1901000

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

SAFE HARBOR PROPERTY MANAGEMENT
233 N COLLIER BLVD
MARCO ISLAND FL 34145

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 ☐ Delete
NAME PA
STREET ADDRESS HILASCHAK, BERNHARD
CITY-ST-ZIP 1036 S. COLLIER BLVD #102
MARCO ISLAND FL 34145

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME S
STREET ADDRESS DRAHEIM, JUDGE N
CITY-ST-ZIP P O BOX 424
CLARION IA

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

TITLE ☐ Delete
NAME VPD
STREET ADDRESS MCCURDY, SUE
CITY-ST-ZIP 1036 S. COLLIER BLVD #204
MARCO ISLD FL 34145

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

TITLE ☐ Delete
NAME TD
STREET ADDRESS HANNIGAN, JOHN
CITY-ST-ZIP 1036 CLOUD CREST DR
GREENTOWN PA 18426

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

TITLE ☒ Delete
NAME D
STREET ADDRESS RICE, AL
CITY-ST-ZIP 27180 MEADOWBROOK
REDFORD MI 48239

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME T
STREET ADDRESS BUD ZINN
CITY-ST-ZIP N47 WEST
29911 MAPLE AVE, UNIT 7
PEWAUKEE, WI 53072

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02

(239) 394-1101

Date

Daytime Phone #

CR2E037 (9/01)