

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

0035764

DOCUMENT # 741428

1. Entity Name

COASTAL VISTA SOUTH ASSOCIATION, INC.

03-08-2001 90016 042 ****61.25

Principal Place of Business

711 N. RIVERSIDE DRIVE
 APT. 203
 POMPANO BEACH FL 33062
 US

Mailing Address

711 N. RIVERSIDE DRIVE
 APT. 203
 POMPANO BEACH FL 33062
 US

928059



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1209385

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

WIDMAR, ROBERT D
 711 N RIVERSIDE DR
 POMPANO BEACH FL 33062

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 BMD ☒ Delete
 NAME SETZ, EDGER C
 STREET ADDRESS 711 N RIVERSIDE DR
 CITY-ST-ZIP POMPANO BEACH FL

TITLE BMD ☒ Change ☐ Addition
 NAME James C Callahan
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VR ☒ Delete
 NAME GARY, THOMAS
 STREET ADDRESS 711 N RIVERSIDE DR
 CITY-ST-ZIP POMPANO BEACH FL

TITLE VR ☒ Change ☐ Addition
 NAME Brian Baker
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME CULLIGAN, JOSEPH
 STREET ADDRESS 711 N RIVERSIDE DR
 CITY-ST-ZIP POMPANO BEACH FL

TITLE D ☐ Change ☒ Addition
 NAME Thomas Jolliat - 711 N Riverside Dr
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DS VP ☐ Delete
 NAME BROVER, ROBERT
 STREET ADDRESS 711 N RIVERSIDE DR
 CITY-ST-ZIP POMPANO BEACH FL

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

TITLE T ☐ Delete
 NAME WIDMAR, ROBERT D
 STREET ADDRESS 711 N RIVERSIDE DR
 CITY-ST-ZIP POMPANO BEACH FL 33062

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

TITLE P ☐ Delete
 NAME WORDELL, LYNN
 STREET ADDRESS 711 N RIVERSIDE DR
 CITY-ST-ZIP POMPANO BEACH FL

TITLE P ☐ 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:

Robert D Widmar - Treasurer
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/2001 941.0552
 Daytime Phone #

CR2E037 (10/00)