2001 UNIFORM BUSINESS REPORT (UBR)

[redacted] 741605

DOCUMENT # 741605

1. Entity Name

BAYSIDE VILLAS CONDOMINIUM ASSOCIATION, INC.

FILED
01 MAY 18 PM 2:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P O BOX 194 ATTN: ASSN. MGMT. CAPTIVA ISLAND FL 33924 US	P O BOX 194 ATTN: ASSN. MGMT. CAPTIVA ISLAND FL 33924 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1978203 ☐ Applied For ☐ Not Applicable

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
SOUTH SEAS PLANTATION RESORT 13000 CAPTIVA ROAD ATTN: ASSN. MGMT. CAPTIVA ISLAND FL 33924	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D FRIEDENSDORF, FRANK 1255 LOG HOLLOW POINT COLORADO SPRINGS CO 80906	☒ Delete	P/D MICHAEL FRASCATI 17 CURTISS ROAD WOODBURY, CT 06798	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LAURIE, CHARLES R JR. 8180 BRECKSVILLE RD BRECKSVILLE OH	☒ Delete	S/T/D BILL MOYNIHAN 131 CARDIGAN ROAD TEWKSBURY, MA 01876	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GOLS, GEORGE 186 CONCORD ROAD WAYLAND WA 01778	☐ Delete	D NANELLE WEHMANN 6004 WHITE HERON LANE SANIBEL, FL 33957	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD KELLY, PETER P O BOX 891 N/A SANIBEL ISLAND FL 33957	☒ Delete	300004421543---9 -06/15/01--01018--008 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NUGENT, DONALD D 201 SUPERIOR AVE CLEVELAND OH	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: Michael Frascato 4-6-01 941-472-5111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #