FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 01, 2001 8:00 am **DOCUMENT # 742711 Secretary of State** 1. Entity Name 02-01-2001 90071 048 ****61.25 LA COSTA CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 1800 GULF DRIVE NORTH 1800 GULF DRIVE NORTH UACCUSE: (Propages) BRADENTON BEACH FL 34217-2395 BRADENTON BEACH FL 34217-2395 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1810451 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) BISHOP, GERALD 2831 RINGLING BLVD #218F City Zip Code SARASOTA FL 34237 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD Change SD TITLE ☐ Addition TITLE ☐ Delete BELFORD, RALPH NAME NAME STREET ADDRESS 4219 PRESIDENTIAL AVE CR E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** TITLE VPD X Delete TITLE ☐ Change Addition NAME HICKS, TOM NAME STREET ADDRESS STREET ADDRESS 1800 GULF DR NORTH, #202 BRADENTON BCH FL CITY-ST-ZIP CITY-ST-ZIP STD Change Delete ☐ Addition TITLE TITLE DAVIS, GUY NAME NAME STREET ADDRESS STREET ADDRESS 4203 100TH STREET W. CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL ☐ Change Delete Addition TITLE TITLE Steven Becker SLAVICK, ROZ NAME 7248 Brod ford Pear Drive STREET ADDRESS STREET ADDRESS 1829 BALTUSROL CT CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33803 Delete TITLE Change ☐ Addition TITLE LONG, TOM NAME NAME STREET ADDRESS STREET ADDRESS 3112 GODFREY RD CITY-ST-ZIP CITY-ST-ZIP **GODFREY IL 60235** BOI 86th Ct. N.W. Addition TITLE □ Delete TITLE ☐ Change LACOMO CONTROL NAME NAME STREET ADDRESS STREET ADDRESS Bradentan, PL 34209 CITY-ST-ZIP City-ST-7IP 12. Thereby certify that the information supplied with this filling 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: REGISTRES SIGNATURE AND TYPED OR MINITED NAME OF SIGNING OFFICER OR DIRECTOR

//24/61

Date Daytime Phone #