

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90068 020 ****61.25

DOCUMENT # 745733

1. Entity Name

THE LANDINGS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

CAUBER MGT. INC
 32708 US 19 NORTH
 PALM HARBOR FL 34684
 US

Mailing Address

CAUBER MGT. INC
 32708 US 19 NORTH
 PALM HARBOR FL 34684
 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

59-1977414

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

TANKER, ROBERT L
1299 MAIN STREET
SUITE F
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name

MARJORIE J. BROWN

Street Address (P.O. Box Number is Not Acceptable)

910 CALIBER MGT

32708 US 19 N.

City

PALM HARBOR

FL

Zip Code

34684

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, 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

TITLE **D** ☐ Delete
 NAME **SWEET, RUTH**
 STREET ADDRESS **2700 NEBRASKA AVENUE 1-205**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE **DVP** ☐ Delete
 NAME **BULLION, DOROTHY**
 STREET ADDRESS **2700 NEBRASKA AVENUE 4-104**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE **SD** ☐ Delete
 NAME **O'BRIEN, KAREN**
 STREET ADDRESS **2700 NEBRASKA AVE. 5-202**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE **VPD** ☒ Delete
 NAME **MCEWAN, HOWARD**
 STREET ADDRESS **2700 NEBRASKA AVENUE, 2-105**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE **TD** ☒ Delete
 NAME **MCINTOSH, HOWARD**
 STREET ADDRESS **2700 NEBRASKA AVENUE, 3-203**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE **D** ☒ Delete
 NAME **COLLINS, BRUCE**
 STREET ADDRESS **2700 NEBRASKA AVENUE, 3-201**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☒ Addition
 NAME **PD**
 STREET ADDRESS **SIEG, WALTER R. JR.**
 CITY-ST-ZIP **2700 NEBRASKA AVE**
PALM HARBOR FL 34684

TITLE ☐ Change ☒ Addition
 NAME **TD**
 STREET ADDRESS **KAREL KEUKER**
 CITY-ST-ZIP **2700 NEBRASKA AVE 3-103**
PALM HARBOR, FL 34684

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **RUTH SWEET**
 CITY-ST-ZIP **2700 NEBRASKA AVE 1-205**
PALM HARBOR, FL 34684

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:

Walter R Sieg
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/28/02 727-787-7811

CR2E037 (9/01)