2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **747706** Apr 07, 2000 8:00 am 1. Entity Name Secretary of State BARDMOOR NORTH PROPERTY OWNERS' ASSOCIATION. INC 04-07-2000 90022 037 ****61.25 Principal Place of Business Mailing Address 837 DEVILLE DR E 837 DEVILLE DR E **LARGO FL 33771** LARGO FL 33771-1120 3 Mailing Address SAILWINDS PROP Mailing Address Suite, Apt. #, etg 583 S. BEZCHER Suite, Apt. #, et DO NOT WRITE IN THIS SPACE KR3 S. BEZCH City & State Applied For 4. FEI Number 59-2876273 CLEARWATER ETAKWATER Not Applicable Country ountry \$8.75 Additional 5. Certificate of Status Desired 76 NEZLAS PINEZLAS Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STANEK WEBB, GLENDEL 8765 BARDMOOR BLVD, #203 LARGO FL 33777 LEARWATER 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition PD TITLE ☐ Change T/TI E ☐ Delete NAME WEBB, GLENDEL NAME STREET ADDRESS STREET ADDRESS 8765 BARDMOOR BLVD #203 CITY-ST-ZIP CITY-ST-ZIP Largo FL 33777 5 D ☐ Change **Addition** TITLE Delete TITLE HARRISON NOBLE NAME WATERS, MIKE NAME DRIVE 10424 LONGWOOD STREET ADDRESS STREET ADDRESS 10442 LONGWOOD DR. 33777 CITY-ST-ZIP CITY-ST-ZIP LARGO LARGO FL ■ Addition ☐ Delete TITLE Change D TITLE NAME SNOKE, BLAIR NAME STREET ADDRESS 8663 MAIDSTONE CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF largo fl Addition D TITLE Change TITLE Delete NAME NAME MARCHETTI, JOANN STREET ADDRESS STREET ADDRESS 8640 LONGWOOD DR. CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Addition Change ☐ Delete TITLE BOARD MAN, ERIKA BOARDMAN, ERIK NAME CORDOVA GREENS STREET ADDRESS STREET ADDRESS 8001 BARDMOOR PLACE CITY-ST-ZIP 33777 CITY-ST-ZIP LARGO LARGO FL ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS 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.

DEQUIPOLENDEL T. WEBB

SIGNATURE: