2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 747717

Apr 22, 2003 Secretary of State

Entity Name: THE INTREPID CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9445 BLIND PASS ROAD 9445 BLIND PASS ROAD ST. PETERSBURGH BEACH, FL 33706 ST. PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

9445 BLIND PASS ROAD 9445 BLIND PASS ROAD ST. PETERSBURGH BEACH, FL 33706 ST. PETE BEACH, FL 33706

FEI Number: 59-2071969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, BRIAN K 10033 9TH STREET N

ST. PETERSBURG, FL 337160805

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:

Title:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

OFFICERS AND DIRECTORS:

() Delete

() Delete (X) Change () Addition

DOSSIN, FRAN DOSSIN, FRAN Name: Name: 10033 9TH ST N Address: 10033 9TH ST N Address:

City-St-Zip: ST. PETERSBURG BEACH, FL City-St-Zip: ST. PETERSBURG, FL 337163804

Title: Title: (X) Change () Addition () Delete JOAS, RICHARD Name: JOAS, RICHARD Name:

Address: 10033 9TH ST N Address: 10033 9TH ST N City-St-Zip: ST. PETE BCH, FL City-St-Zip: ST. PETERSBURG, FL 337163804

Title: () Delete Title: (X) Change () Addition SKLET, ANTHONY SKLET, ANTHONY Name: Name:

10033 9TH ST N Address: Address: 10033 9TH ST N

City-St-Zip: ST. PETERSBURG, FL City-St-Zip: ST. PETERSBURG, FL 337163804

Title: SD () Delete Title: SD (X) Change () Addition

BRUSKY, DONALD Name: Name: BRUSKY, DONALD Address: 10033 9TH ST N Address: 10033 9TH ST N ST. PETERSBURG, FL 337163804 City-St-Zip: ST. PETE BEACH, FL City-St-Zip:

STALEY, CHERI ELINOR, FAITH Name: Name: 10033 9TH ST N 10033 9TH ST N Address: Address:

ST. PETERSBURG, FL 337163804 City-St-Zip: ST. PETE BEACH, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

SIGNATURE: FRAN DOSSIN PD 04/22/2003