

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90346 002 ****61.25

0018131

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1. Entity Name

SUN COUNTRY VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**3723 + 3775 59TH ST NO
ST PETERSBURG FL 33710**

Mailing Address

**3723 + 3775 59TH ST NO
ST PETERSBURG FL 33710**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2071066**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HAUSER, ALICE
3723 59TH STREET NO. #1
SAINT PETERSBURG FL 33710**

7. Name and Address of New Registered Agent

Name **Kathy McGinnis**
Street Address (P.O. Box Number is Not Acceptable) **3775 59th St. N. # 2-2**
St. Petersburg
City **FL** Zip Code **33710**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Kathy McGinnis*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7-11-03
DATE

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **SELMYHR, ANN**
STREET ADDRESS **3775 59TH ST N #1A**
CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

TITLE **Treasurer** ☒ Change ☐ Addition
NAME **Kathy McGinnis**
STREET ADDRESS **3775 59th St. N. # 2-2**
CITY-ST-ZIP **St. Petersburg, FL 33710**

TITLE **T** ☒ Delete
NAME **HAUSER, ALICE**
STREET ADDRESS **3723 59TH STREET NO. #1**
CITY-ST-ZIP **SAINT PETERSBURG FL 33710**

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

TITLE **SD** ☐ Delete
NAME **TOUCHTON, SHARON**
STREET ADDRESS **891 79TH ST S**
CITY-ST-ZIP **SAINT PETERSBURG FL 33707**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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.

SIGNATURE:

SIGNATURE REQUIRED

Ann Selmyhr 7/11/03 (727) 345-4204
Kathy McGinnis 7-11-03 345-4204

CR2E037 (4/03)