

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751256

1. Entity Name

CANAVERAL SANDS CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90080 032 ****61.25

0029591

Principal Place of Business

1980 N. ATLANTIC AVE.
701
COCOA BEACH F 32931
US

Mailing Address

1980 N. ATLANTIC AVE.
701
COCOA BEACH FL 32931
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

59-2226215

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, PETEY
1980 N ATLANTIC AVE
STE 701
COCOA BEACH FL 32931

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 if 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 NAME STREET ADDRESS CITY-ST-ZIP	DVP SMALLY, ED 8500 RIDGEWOOD #506 CAPE CANAVERAL FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCKENZIE, MARY 8498 RIDGEWOOD AVE #2302 CAPE CANAVERAL FL 32920	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARFONE, CAROL 8498 RIDGEWOOD AVE #2203 CAPE CANAVERAL FL 32920	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HINNIG, LINDA 8500 RIDGEWOOD AVE #504 CAPE CANAVERAL FL 32920	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HURLEY, PAUL 8496 RIDGEWOOD AVE #3501 CAPE CANAVERAL FL 32920	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vickers, Richard 805 Gascon PL Temple Terrace FL 33617	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Hennig	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kippy Jones 1672 Waterwich Dr Orlando FL 32806	☐ Change ☒ Addition

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:

Edwin Smally
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-01

Date

321-784-8781

Daytime Phone #

CR2E037 (10/00)