

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90066 025 ****61.25

DOCUMENT # 751374

1. Entity Name

SCOTTISH TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

INC.
464 N PAULA DR
DUNEDIN FL 34698

INC.
464 N PAULA DR
DUNEDIN FL 34698

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

59-1977516

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEZER, P A STEVEN H
1212 COURT ST STE B
CLEARWATER FL 33756

Name

Roman + Roman, P.A.

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

2196 Main Street, Suite L

City

Dunedin

FL

Zip Code

34698

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

Roman + Roman, P.A.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/25/02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME BASAGIC, DOROTH
STREET ADDRESS 464 PAULA DR NORTH #123
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☒ Change ☐ Addition
NAME s/d
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME GATES, LESTER
STREET ADDRESS 464 N PAULA DR STE 116
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☒ Change ☐ Addition
NAME V/T/D
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME SETTLE, NELLIE
STREET ADDRESS 1501 PINE DRIVE
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE ☐ Change ☒ Addition
NAME GARCIA, GEORGE
STREET ADDRESS 464 PAULA DR N. #119
CITY-ST-ZIP DUNEDIN, FL 34698

TITLE SD ☒ Delete
NAME RIPPEY, GARY
STREET ADDRESS 464 N. PAULA DR #319
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Change ☒ Addition
NAME SULLY, LEO
STREET ADDRESS 7786 SKYLINE VIEW DR.
CITY-ST-ZIP CONCORD TOWNSHIP, OH 44060

TITLE D ☐ Delete
NAME MIDGLEY, JACK
STREET ADDRESS 3006 MANLEY DRIVE
CITY-ST-ZIP LANSING MI 48910

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

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 of Officer or Director (LESTER T. GATES)

Date

4/15/2002

727

734-2993

Daytime Phone #

CR2E037 (9/01)