

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

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90222 040 ****61.25

DOCUMENT # 751473

1. Entity Name

SEA TURTLE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**7201 RIDGEWOOD AVE
CAPE CANAVERAL FL 32920**

Mailing Address

**SEA TURTLE CONDO C/O JEFF TRIPP
#2 BRASTON LN
JORDAN NY 13080**

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 **59-2296008**

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

**TRIPP, ANNETTE
7201 RIDGEWOOD AVE
CAPE CANAVERAL FL 32920**

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE \$61.25

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 **HERNANDEZ, TOMAS**
STREET ADDRESS **7201 RIDGEWOOD AVE #23**
CITY-ST-ZIP **CAPE CANAVERAL FL 32920**

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

TITLE **T** ☒ Delete
NAME **TRIPP, JEFFREY**
STREET ADDRESS **2 BRASTON LANE**
CITY-ST-ZIP **JORDAN NY 13080**

TITLE ☒ Change ☐ Addition
NAME **Treasurer**
STREET ADDRESS **Julie Song**
CITY-ST-ZIP **896 Linenick Dr.**
Merritt Island, FL

TITLE **S** ☐ Delete
NAME **TRIPP, ANNETTE**
STREET ADDRESS **2 BRASTON LANE**
CITY-ST-ZIP **JORDAN NY 13080**

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

TITLE **VD** ☒ Delete
NAME **LUNKENHEIMER, VICTORIA**
STREET ADDRESS **13054 RT 176**
CITY-ST-ZIP **HANNIBAL NY 13074**

TITLE ☒ Change ☐ Addition
NAME **Vice President**
STREET ADDRESS **Mr. Alain Mazandon**
CITY-ST-ZIP **580 South Broadway Ave**
Coconut Beach, FL 32937

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

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

Signature of Annette Tripp

2/16/03

315-689-9722

CR2E037 (10/02)