

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

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90398 046 ****61.25

DOCUMENT # 755591

1. Entity Name
CALAIS VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**5729-1 CALAIS BLVD.
ST PETERSBURG FL 33714**

Mailing Address
**10033 9TH STREET NORTH 5901 Sun Blvd
2ND FLOOR
SAINT PETERSBURG FL 33716
US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
5901 Sun Blvd
Suite, Apt. #, etc.
200

City & State
St. Petersburg FL

Zip
33715

Country
USA



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2020909**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RAMPART PROPERTIES
10033 9TH STREET NORTH
2ND FLOOR
SAINT PETERSBURG FL 33716**

7. Name and Address of New Registered Agent
Name **Resource Property Management**
Street Address (P.O. Box Number is Not Acceptable)
5901 Sun Blvd Suite 200
City **ST. Petersburg** FL Zip Code **33715**

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 *Christine S. Wayda* **CMCA, AMS** **1/27/03**
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 Florida Department of State

| 10. OFFICERS AND DIRECTORS | | |
|----------------------------|----------------------------------|--|
| TITLE | PD | <input checked="" type="checkbox"/> Delete |
| NAME | VILIAUME, ED | |
| STREET ADDRESS | 10033 9TH STREET NORTH 2ND FLOOR | |
| CITY-ST-ZIP | SAINT PETERSBURG FL 33716 | |
| TITLE | VPD | <input checked="" type="checkbox"/> Delete |
| NAME | KASSIS, MARLINE | |
| STREET ADDRESS | 10033 9TH STREET N 2ND FLOOR | |
| CITY-ST-ZIP | SAINT PETERSBURG FL 33716 | |
| TITLE | SD | <input checked="" type="checkbox"/> Delete |
| NAME | SCHONEMAN, GAYLE | |
| STREET ADDRESS | 10033 9TH STREET NORTH 2ND FLOOR | |
| CITY-ST-ZIP | SAINT PETERSBURG FL 33716 | |
| TITLE | TD | <input checked="" type="checkbox"/> Delete |
| NAME | TODD, ROBERT | |
| STREET ADDRESS | 10033 9TH STREET NORTH 2ND FLOOR | |
| CITY-ST-ZIP | SAINT PETERSBURG FL 33716 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | HAKLER, FRANK | |
| STREET ADDRESS | 10033 9TH STREET NORTH 2ND FLOOR | |
| CITY-ST-ZIP | SAINT PETERSBURG FL 33716 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|--------------------------|--|
| TITLE | DP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Hakler, Donna Jeanne | |
| STREET ADDRESS | 5769 Calais Blvd #4 | |
| CITY-ST-ZIP | ST. Petersburg, FL 33714 | |
| TITLE | DVP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Cunningham, Thomas | |
| STREET ADDRESS | 5943 Calais Blvd #11 | |
| CITY-ST-ZIP | ST. Petersburg FL 33714 | |
| TITLE | DS | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Dyer, Flossie | |
| STREET ADDRESS | 5943 Calais Blvd # 3 | |
| CITY-ST-ZIP | ST. Petersburg, FL 33714 | |
| TITLE | DT | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Kenney, Edward | |
| STREET ADDRESS | 5756 Calais Blvd #4 | |
| CITY-ST-ZIP | ST. Petersburg, FL 33714 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Marks, Shuford | |
| STREET ADDRESS | 5861 Calais Blvd # 4 | |
| CITY-ST-ZIP | ST. Petersburg FL 33714 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | May, Roy | |
| STREET ADDRESS | 5768 Calais Blvd #1 | |
| CITY-ST-ZIP | ST. Petersburg, FL 33714 | |

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: *Christine S. Wayda* **REQUIRED**

CR2E037 (10/02)