2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

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Entity Name: SILVER SANDS OF BONITA BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

26140 HICKORY BLVD.
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2507
BONITA SPRINGS, FL 33959 US

New Mailing Address:

P. O. BOX 2507
BONITA SPRINGS, FL 34133 US

FEI Number: 59-2188182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, BRADLEY K
27657 US OLD 41 RD
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

SMITH, BRADLEY R
27657 US OLD 41 RD
BONITA SPRINGS, FL 34135 US

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: BRADLEY R. SMITH 04/30/2002
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: HOEHNE, ROBERT
Address: 635 WICKLOW RD
City-St-Zip: DEERFIELD, IL 60015

Title: D ( ) Delete
Name: KNIGHT, RICHARD
Address: P.O. BOX 37
City-St-Zip: ROCK SPRINGS, WI 53961

Title: D ( ) Delete
Name: KLOPP, LARRY
Address: 26140 HICKORY BLVD. #503
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP ( ) Delete
Name: GROSSLEIN, AUGUST,
Address: 1120-BENTON ST
City-St-Zip: ANOKA, MN 55303

Title: PD ( ) Delete
Name: HUNT, DONALD
Address: 26140 HICKORY BLVD., 8C
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY KLOPP D 04/30/2002
Electronic Signature of Signing Officer or Director Date