

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

0043339

03-14-2002 90067 022 ****61.25

DOCUMENT # 757992

1. Entity Name

BORDEAUX VILLAGE ASSOCIATION, NO. 3, INC.

Principal Place of Business

Mailing Address

EGRET BLVD., #103
 CLEARWATER FL 33762

2453 EGRET BLVD., #103
 CLEARWATER FL 33762
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

13602 FRIGATE CT #N-103

Suite, Apt. #, etc.

2325 CLMERTON RD
 SUITE #11

City & State

CLEARWATER, FL

City & State

CLEARWATER, FL

Zip

33762

Country

PINE/IAS

Zip

33762

Country

PINE/IAS

4. FEI Number

59-2118161

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

RADIGAN, F M
 2453 EGRET BLVD 0-103
 CLEARWATER FL 34622

Name

RICHARD TEACHER

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

13602 FRIGATE CT #N-103

City

CLEARWATER

FL

Zip Code

33762

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

Richard Teacher RICHARD TEACHER

3/4/02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|------------------------|--|
| TITLE | P | <input checked="" type="checkbox"/> Delete |
| NAME | RADIGAN, FRANCIS | |
| STREET ADDRESS | 2453 EGRET BLVD. #103 | |
| CITY-ST-ZIP | CLEARWATER FL 34622 | |
| TITLE | VP | <input checked="" type="checkbox"/> Delete |
| NAME | SMOLIK, PETER | |
| STREET ADDRESS | 13602 FRIGATE CT. #201 | |
| CITY-ST-ZIP | CLEARWATER FL 34622 | |
| TITLE | SD | <input type="checkbox"/> Delete |
| NAME | WILKINS, DOROTHY | |
| STREET ADDRESS | 2453 EGRET BLVD., #102 | |
| CITY-ST-ZIP | CLEARWATER FL 33762 | |
| TITLE | T | <input checked="" type="checkbox"/> Delete |
| NAME | TEACHER, RICHARD | |
| STREET ADDRESS | 13602 FRIGATE CT N-103 | |
| CITY-ST-ZIP | CLEARWATER FL 33762 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | ANKWEZ, WALTER | |
| STREET ADDRESS | 13602 FRIGATE CT N-102 | |
| CITY-ST-ZIP | CLEARWATER FL 33762 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|-------------------------|--|
| TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | RICHARD TEACHER | |
| STREET ADDRESS | 13602 FRIGATE CT #N-103 | |
| CITY-ST-ZIP | CLEARWATER, FL 33762 | |
| TITLE | VP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | WALTER ANKWEZ | |
| STREET ADDRESS | 13602 FRIGATE CT #N103 | |
| CITY-ST-ZIP | CLEARWATER, FL 33762 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | T | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FRANCIS RADIGAN | |
| STREET ADDRESS | 2453 EGRET BLVD #0-103 | |
| CITY-ST-ZIP | CLEARWATER, FL 33762 | |
| TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PETER SMOLIK | |
| STREET ADDRESS | 13602 FRIGATE CT #N-201 | |
| CITY-ST-ZIP | CLEARWATER, FL 33762 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Richard Teacher* RICHARD TEACHER, PRESIDENT 3/4/02 (787) 573-3333

CR2E037 (9/01)