

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759054

1. Entity Name

BAHIA DEL SOL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

P.O. BOX 1767  
RUSKIN FL 33570

Mailing Address

P.O. BOX 1767  
RUSKIN FL 33570

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BECKER & PALIAKOFF P.A.  
33 NORTH GARDEN AVE  
SUITE 960  
CLEARWATER FL 33755

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

TITLE PD  
NAME NORTON, PAUL  
STREET ADDRESS 828-A BAHIA DEL SOL DRIVE  
CITY-ST-ZIP RUSKIN FL 33570 ☐ Delete

TITLE VPD  
NAME JANES, SHEILA  
STREET ADDRESS 828B BAHIA DEL SOL DR  
CITY-ST-ZIP RUSKIN FL ☐ Delete

TITLE SD  
NAME GRANT, JOYCE  
STREET ADDRESS 824-D BAHIA DEL SOL DRIVE  
CITY-ST-ZIP RUSKIN FL 33570 ☐ Delete

TITLE TD  
NAME DEGRAFF, DAVE  
STREET ADDRESS 823-B BAHIA DEL SOL DRIVE  
CITY-ST-ZIP RUSKIN FL 33570 ☐ Delete

TITLE D  
NAME DUCE, PETER  
STREET ADDRESS 826-D BAHIA DEL SOL DRIVE  
CITY-ST-ZIP RUSKIN FL 33570 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE D  
NAME PATTY SUMNER  
STREET ADDRESS 821-B BAHIA DEL SOL DR  
CITY-ST-ZIP RUSKIN, FL 33570 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
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:

*Sheila Janes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHEILA JANES 4/16/01

Date

Daytime Phone #

813-634-1919

FILED  
Apr 26, 2001 8:00 am  
Secretary of State

04-26-2001 90067 019 \*\*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2114741

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

CR2E037 (10/00)