

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State
 03-25-2002 90160 008 ****61.25

DOCUMENT # 759054

1. Entity Name

BAHIA DEL SOL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1767
 RUSKIN FL 33570

P.O. BOX 1767
 RUSKIN FL 33570

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2114741

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

BECKER & PALIAKOFF P.A.
33 NORTH GARDEN AVE
SUITE 980
CLEARWATER FL 33755

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NORTON, PAUL 828-A BAHIA DEL SOL DRIVE RUSKIN FL 33570	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD JANES, SHEILA 828B BAHIA DEL SOL DR RUSKIN FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRANT, JOYCE 824-D BAHIA DEL SOL DRIVE RUSKIN FL 33570	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DEGRAFF, DAVE 823-B BAHIA DEL SOL DRIVE RUSKIN FL 33570	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUMNER, PATTY 821-B BAHIA DEL SOL DRIVE RUSKIN FL 33570	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAY HUFFER 809-D Bahia Del Sol DR. RUSKIN, FL 33570	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TAMMY HECKER 803-A Bahia Del Sol DR. RUSKIN, FL 33570	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD George Malanga 803-C Bahia Del Sol DR. RUSKIN, FL 33570	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Norm Meers 819-B Bahia Del Sol DR. 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-02

Date

Daytime Phone #

CR2E037 (9/01)