

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759870

1. Entity Name

EMERALD SURF CONDOMINIUM OWNERS' ASSOCIATION, IN C.

Principal Place of Business

8245 GULF BLVD.
NAVARRE BEACH FL 32566

Mailing Address

8245 GULF BLVD.
NAVARRE BEACH FL 32566

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

59-2947134

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CENTURY 21 ISLAND VIEW REALTY
8510 NAVARRE PKWY
NAVARRE FL 32566

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 D
NAME BENCHEA, TRAIAN
STREET ADDRESS 1280 W. HICKORY SPRINGS
CITY-ST-ZIP BRENTWOOD TN 37027 ☐ Delete

TITLE D
NAME RICHARDS, RUTH
STREET ADDRESS 5810 HOWELL HIGHLANDS PLACE
CITY-ST-ZIP STONE MOUNTAIN GA 30087 ☐ Delete

TITLE PD
NAME WEBSTER, BILL
STREET ADDRESS 119 LAUREL DR
CITY-ST-ZIP AUBURN AL 36830 ☒ Delete

TITLE DVP
NAME KAIN, MIKE
STREET ADDRESS 21 PAVE LN.
CITY-ST-ZIP GLEN MILLS PA 19342 ☐ Delete

TITLE D
NAME CINAGLIA, ED
STREET ADDRESS 2204 HILLSIDE RD
CITY-ST-ZIP WILMINGTON DE 19810 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Benchea TRAIAN D
NAME 1280 W Hickory Sp.
STREET ADDRESS Brentwood TN
CITY-ST-ZIP 37027 ☐ Change ☐ Addition

TITLE VP D
NAME Ruth Richards
STREET ADDRESS 5810 Howell Highlands
CITY-ST-ZIP Stone Mt. GA 30087 ☒ Change ☐ Addition

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

TITLE President D
NAME Mike Kain
STREET ADDRESS 21 PAUL LANE
CITY-ST-ZIP Glen Mills, Pa 19342 ☒ Change ☐ Addition

TITLE D
NAME John Anderson
STREET ADDRESS 14708 Willet Way
CITY-ST-ZIP Tampa, FL 33625 ☐ 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

IGNORIO REYES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/02 850-939-2366

Date

Daytime Phone #

FILED
Mar 12, 2002 8:00 am
Secretary of State

02-03-2002 90012 019 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)