FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 28, 2001 8:00 am Secretary of State **DOCUMENT # 759967** 1. Entity Name LOVERS KEY BEACH CLUB CONDOMINIUM, INC. 04-28-2001 90045 031 \*\*\*\*61.25 Principal Place of Business Mailing Address 8701 ESTERO BLVD SUNSTREAM INC. 6620 ESTERO BLVD FT MYERS FL 33931-5127 646233 FORT MYERS BEACH FL 33931 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2447543 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent and the contract of the contra Street Address (P.O. Box Number is Not Acceptable) MONSRUD, MARY A SUNSTREAM, INC 6620 ESTERO BLOULEVARD City Zip Code FL FORT MYERS BEACH FL 33931 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITI F TITLE ☐ Delete LAWrence, David A. LAWRENCE, DAVID A NAME NAME 1345 High Point Ct. STREET ADDRESS STREET ADDRESS 1345 HIGH POINT CT CITY-ST-ZIP CITY-ST-ZIP HASTINGS MN 55033 MN 55033 X Change ☐ Addition TD ☐ Delete TITLE TITLE Vogel , James 622 SW 27th St. VOGEL, JAMES NAME NAME STREET ADDRESS STREET ADDRESS 622 SW 27TH ST CITY-ST-ZIP CITY-ST-7IP **GAINESVILLE FL 32607** Gainesville FL 32607 r/DDelete ☐ Change 🗶 Addition TITLE TITLE HORNING, ROBERT --REDDY; DONALD = \*\*\* NAME NAME 8991 JANE ROAD NORTH STREET ADDRESS STREET ADDRESS 1700 MEDICAL LANE CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33907 LAKE ELMO , MN ☐ Change \*Addition TITLE Delete TITLE ness, John GRUNDBERG, GUNNAR NAME STREET ADDRESS 16229 NORTH 67th LANE STREET ADDRESS 6090 ESTERO BLVD CITY-ST-ZIP CITY-ST-ZIP FT MYERS BCH FL 33931 STILLWATER 55082 TITLE Delete TITLE Change Addition ROMANCÍK, MIKE NAME NAME BEEBE, COL. JOHN STREET ADDRESS STREET ADDRESS 6042 N AVONDALE 10 KERINS TERRACE CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60631 NEWPORT RI GREYO-4024 TITLE TITLE Change ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 as cumplemental 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 of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corpora I hereby cermy similar indicated on this repeat of cumulantension of the corporation or the receiver of the corporation of the

941-765-Y111 Daytime Phone #