

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 760180

1. Entity Name

HIDEAWAY SANDS RESORT LESSEES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3804 GULF BLVD.
ST PETERSBURG BEACH FL 33706

3804 GULF BLVD.
ST PETERSBURG BEACH FL 33706

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 59-2185388

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

ADAMS, THOMAS D.
3804 GULF BLVD.
ST. PETERSBURG FL 33706

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
After September 12, 2001, min. will be \$236.25

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 PD
STREET ADDRESS BELCHER, ANN
CITY-ST-ZIP 11424 CIMMARON CIRCLE N.
LARGO FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME VD
STREET ADDRESS MILBOURN, RUSSELL
CITY-ST-ZIP 1332 PASADENA AVE #601
ST. PETERSBURG FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME S
STREET ADDRESS CARDELL, BRUCE
CITY-ST-ZIP P.O. BOX 530163 N/A
ST PETERSBURG FL 33747

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME T
STREET ADDRESS KIESGEN, JIM
CITY-ST-ZIP 3606 CHEROKEE AVE.
TAMPA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME D
STREET ADDRESS PEREZ, LOUIS
CITY-ST-ZIP 77181 HIGHWAY 21
COVINGTON LA 70435-4011

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME AAS
STREET ADDRESS ADAMS, THOMAS D.
CITY-ST-ZIP 3804 GULF BLVD
ST. PETERSBURG BEACH FL

☐ Delete

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: Thomas D. Adams Not Sec. 7/6/01 727-367-2781

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90115 008 ****70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)