## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 15, 2002 8:00 am Secretary of State **DOCUMENT # 762945** 1. Entity Name FLAMINGO BAY CLUB CONDOMINIUM ASSOCIATION, INC. 05-15-2002 90165 016 \*\*\*\*61.25 Principal Place of Business Mailing Address 380 8TH AVEN NO C/O QUALITY MGMT SER PO BOX 66245 TIERRA VERDE FL 33715 ST. PETE BEACH FL 33736 US US 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 59-2365910 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SCHNOOR, FRANK 7217 GULF BLVD SUITE 6 P.O. BOX 66245 ST. PETERSBURG FL 33706 City Zip Code FL 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 Pavable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change X Addition DP SOCCORSO, JOSEPH S. NAME NAME WALCZEWSKI, ELAINE STREET ADDRESS 380 8TH AVENUE NORTH, UNIT #4 STREET ADDRESS 380 8th Ave. No. Unit #8 TIERRA VERDE FL CITY-ST-ZIP CITY-ST-ZIP Tierra Verde, El 33715 다 Change TITLE □ Delete TITLE ☐ Addition VELVERTON, WAYNE YELVERTON, WAYNE NAME NAME 380 8TH AVENEU NORTH UNIT 6 STREET ADDRESS STREET ADDRESS CITY-ST-7IP TIERRA VERDE FL CITY-ST-ZIP ΠP TITLE Elete TITLE Change ☐ Addition DANIEL, SHERRYL NAME NAME 380 8TH AVENUE NORTH, UNIT #9 STREET ADDRESS STREET ADDRESS TIERRA VERDE FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI E Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME NAME

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

STREET ADDRESS

CITY-ST-ZIP

ZWAYNE VELVERTON 3/9/0V SIGNATURE

STREET ADDRESS

CITY-ST-ZIP