## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Jan 26, 2001 8:00 am Escretary of State DOCUMENT # 763681 ISLA DEL SOL OWNERS' ASSOCIATION, INC. 01-26-2001 90141 009 \*\*\*\*61.25 Principal Place of Business Mailing Address % BACON & BACON, P.A., ATTORNEYS AT LAW % BACON & BACON, P.A., ATTORNEYS AT LAW 2959 FIRST AVENUE NORTH 2959 FIRST AVENUE NORTH AUU11992 ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2253935 Not Applicable Country Zip 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) BACON, DAVID A. **BACON & BACON PA** 2959 FIRST AVENUE NORTH Zip Code ST. PETERSBURG FL 33713 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 FILE NOW: Make Check Pavable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 **Department of State** Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition LORD, ALAN C NAME NAME STREET ADDRESS 6372 PALMA DEL MAR CIR 505 STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33715 CITY-ST-ZIP TITLE TD Delete TITLE Change ☐ Addition NAME AMODED, JOHN NAME STREET ADDRESS 6290 BANIA DEL MAR CIR TH 11 STREET ADDRESS CITY-ST-ZIP-SAINT PETERSBURG FL 33705 CITY-ST-ZIP TITLE ☐ Delete TITLE. Change ☐ Addition NAME JOHNSON, JENNIFER NAME STREET ADDRESS 160-1C PINELLAS BAY WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIERRA VERDE FL DILAVOIE TITLE ☐ Delete TITLE ☐ Change ☐ Addition WAYOIE TERRY NAME NAME STREET ADDRESS 6365 BAHIA DEL MAR BLVD 603J STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33715 TITLE ☐ Delete TITLE ☐ Change ☐ Addition DORSO、 進躍Y Co E れぬしま 丁. NAME NAME STREET ADDRESS 6287M SUN BLVD 7H7 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33715 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GOODGER, PHILIP M NAME STREET ADDRESS 6265 SUN BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33715 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.