2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 764061 Apr 18, 2000 8:00 am Secretary of State 1. Entity Name SUNCHASE CONDOMINIUM ASSOCIATION OF GULF BREEZE. 04-18-2000 90221 018 ****61.25 Principal Place of Business Mailing Address 3298 SUMMIT BLVD 3298 SUMMIT BLVD STE 4 STE 4 PENSACOLA FL 32503-4350 PENSACOLA FL 32503 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 59-2267056 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 Name Street Address (P.O. Box Number is Not Acceptable) ETHERIDGE, RAY O. 3298 SUMMIT BLVD STE 4 Zip Code City PENSACOLA FL 32503 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 of registered agent and title if applicable DATE Signature, typed or printed page (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$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 10. DP Director □ effange ☐ Addition ☐ Delete TITLE TITLE Lauer, Bill NAME NAME 914 LAKEWOOD DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MILTON FL ☐ Change ☐ Addition STD Delete TITLE TITLE Sec./Treas. Steve Domeracki ETHRIDGE, RAY NAME NAME 200 PENSACOLA BEACH Rd J.1 3298 SUMMIT BLVD STE 4 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Gulf Breeze F1 32861 CITY-ST-ZIP PENSACOLA FL VPD TITLE _ Delete --TITLE 🖘 🕒 President Change ☐ Addition jensen, ken NAME NAME STREET ADDRESS 200 PENSACOLA BCH RD., K-8 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GULF BREEZE FL 32561 ☐ Delete TIT) F Change ☐ Addition TITLE KEHOE, JAMES NAME NAME 200 PENSACOLA BCH RD., L-78 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **GULF BREEZE FL 32561** Vice President Delete TITI F ☐ Change ☐ Addition TITLE MCRARY, LYNN Tony Conn NAME NAME 200 Bensacola Beach Rd Ate STREET ADDRESS 1250 TALL PINE RD STREET ADDRESS Gulf Breeze Fl. 32561 CITY-ST-ZIP **GULF BREEZE FL 32561** CITY-ST-7IP Director ☐ Change Addition Delete TITLE TITLE Harry LAtaurette BELCHER, BILLY NAME NAME 530 Eventide Drive 200 PENSACOLA BEACH RD. K-3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Gulf Breeze Fl Gulf Breeze Fl. 32561

12. I hereby certify that the information supplied with this filling 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.

IGNATURE: SIGNATURE PROS. 1 DECED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.12.00

434-3585