## ~ 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 15, 2001 8:00 am Secretary of State DOCUMENT # 765284 1. Entity Name THE DUNES CLUB COMMUNITY ASSOCIATION, INC. 03-15-2001 90205 047 \*\*\*\*61.25 Mailing Address Principal Place of Business AMELIA ISLAND PLANTATION AMELIA ISLAND PLANTATION AMELIA ISLAND FL 32034 AMELIA ISLAND FL 32034 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2411386 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 Street Address (P.O. Box Number is Not Acceptable) AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HWY, 34 AMELIA ISLAND FL 32034 Zip Code City 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) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE ☐ Change TITLE ☐ Delete HARDWICK, JAMES NAME NAME STREET ADDRESS STREET ADDRESS **6735 LINFORD LANE** CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32217 TD Delete Addition TD TITLE TITLE SENEKER, JERRY NAME GESSNER, GENE NAME 3270 SPAULDING DR STREET ADDRESS 123 N LINN ST #2E STREET ADDRESS DUNWOODY, GA 30350 CITY-ST-ZIP CITY-ST-7IP IOWA\*CITY.\*IO Change ■ Addition ☐ Delete TITLE HENDERSON, TOM NAME NAME STREET ADDRESS 118 VAN HOUTON AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHATHAM NJ 07928 TITLE ☐ Change Addition ☐ Delete TITLE ADELMAN, ROBERT D NAME NAME

CITY-ST-ZIP AMELIA ISAND FL

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

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SD

BROGAN, ALAN

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

TITLE

NAME

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

1540 BEACHWALKER RD.

AMELIA ISLAND FL

BAZARIAN, CARL

20 DUNES ROW

AMELIA ISLAND FL

SCHMIDIT, CHARLES

1504 BEACH WALKER RD

☐ Delete

Delete

11290 CEDAR POINT DR

☐ Change

☐ Change

☐ Addition

Addition

633653 D# 765284

## DCCA BOARD OF DIRECTORS, cont.

Fred Abood 3715 Liberty Lane Marietta, GA 30062