

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90015 018 ****61.25

DOCUMENT # 766243

1. Entity Name

SANDPIPER CONDOMINIUM ASSOCIATION OF MARCO ISLAN

Principal Place of Business	Mailing Address
850 SOUTH COLLIER BLVD. MARCO ISLAND FL 33937	850 SOUTH COLLIER BLVD. MARCO ISLAND FL 34145-6120

614233



DO NOT WRITE IN THIS SPACE

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	59-2262504	Applied For
		Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

GREUSEL, JAMIE B
1104 NO COLLIER BLVD
MARCO ISLAND FL 34145

7. Name and Address of New Registered Agent

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

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

TITLE	SOD	<input checked="" type="checkbox"/> Delete
NAME	WILKINS, ROBERT	
STREET ADDRESS	850 SO. COLLIER BLVD. #1401	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	POD	<input type="checkbox"/> Delete
NAME	KUHN, ARTHUR	
STREET ADDRESS	850 S COLLIER BLVD, #502	
CITY-ST-ZIP	MAROC ISLAND FL 34145	
TITLE	TOD	<input type="checkbox"/> Delete
NAME	ALLGAYER, WERNER	
STREET ADDRESS	850 S COLLIER BLVD	
CITY-ST-ZIP	MARCO ISLAND FL 34145	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIS, RICHARD R.	
STREET ADDRESS	850 SOUTH COLLIER BLVD SUITE 401	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	VOD	<input type="checkbox"/> Delete
NAME	MOLONY, SAMUEL	
STREET ADDRESS	850 S COLLIER BLVD #1201	
CITY-ST-ZIP	MARCO ISLAND FL	
TITLE	SOD	<input type="checkbox"/> Delete
NAME	FOSS, ROBERT	
STREET ADDRESS	850 S COLLIER BLVD, #1603	
CITY-ST-ZIP	MAROC ISLAND FL 34145	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Junker, Edward	
STREET ADDRESS	850 So. Collier Blvd. #1204	
CITY-ST-ZIP	Marco Island, FL 34145	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 _____

441-394-3083

CR2E037 (9/99)