2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766716

1. Entity Name

FILED
Jun 19, 2002 8:00 am
Secretary of State

05-24-2002 90556 034 ****61 25

SEABL	JRY POINT PROPERTY OWNE	R'S ASSOCIATION, INC	C.	V 03-2	24-2002 90336 034	61.23	
Principal Pla	ace of Business	Mailing Address					
	'Y Harrison Iry Point Road, N.W. Fl. 32907	ATTN: BETTY HARRISON 1637 SEABURY POINT ROAD PALM BAY FL 32907 US). N.W.	I MARII TAR		i Ozori eloni eroni el	
2. Principal /690 Suite, Ap		3. Mailing Address 1690 Sephany Politics Suite, Apt. #, etc/	int Road	به ب	DO NOT WRITE IN THI	S SPACE	
City & Sta		Palm Boy F	londa	4. FEI Number	NOT APPLICABLE		olied For Applicable
Zip 3 29	Country US: At series	Zip	Country A	- 5. Certificate of S	Status Desired	\$8.75 Addi	ttonal
	6. Name and Address of Current F	Registered Agent			dress of New Registere	d Agent	
 ••••	~		Name	Robert A	psey		
.	ON, BETTY K		Street	Address (P.O. Box Number is	Not Acceptable)		
	ABURY POINT ROAD, N.W. Ay Fl 32907		169	O Scobury	Point Rd	NW	
			City Pa	alm Box	F	L Zip Code	907
8. The above	e named entity submits this statement for	the purpose of changing its reg	istered office o	r registered agent/or both, in	the state of Florida.		7
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SIGNATURE	_///				4-30	-02	ļ
		nd title if applicable. (NOTE: Rec					
	Signature of regressive agent at	no use n'appecable. (NOTE: Hég	gistered Agent signat	ure required when reinstating)	DATE		j
	FILE NOW: FEE IS \$61.25	9. Election Campai Trust Fund Contr	ign Financing	\$5.00 May Be Added to Fees	Make Che	ck Payable to ent of State	0
10.	FILE NOW: FEE IS \$61.25	9. Election Campai Trust Fund Contr	ign Financing	S5.00 May Be Added to Fees ADDITIONS/CHANG	Make Che Departm	ck Payable to ent of State	
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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

SIGNATURE:

321726959Z