

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 767982

1. Entity Name

BOCA VISTA CLUB ASSOCIATION, INC.

Principal Place of Business

Mailing Address

401-150TH AVENUE. #278
MADEIRA BEACH FL 33708-2029

401-150TH AVENUE. #278
MADEIRA BEACH FL 33708-2059

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

59-2305637

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STONER, PATRICIA A
401-150TH AVE.
233
MADEIRA BEACH FL 33708

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
ST
STONER, PATRICIA A
STREET ADDRESS
401-150TH AVE. # 233
CITY-ST-ZIP
MADEIRA BEACH FL 33708

TITLE
NAME
D
MARKIS, JOHN
STREET ADDRESS
401-150 AVE
CITY-ST-ZIP
MADEIRA BEACH FL

TITLE
NAME
D
COWAN, DESMOND
STREET ADDRESS
401-150TH AVE, #274
CITY-ST-ZIP
MADEIRA BEACH FL

TITLE
NAME
PD
STONER, WILLIAM M
STREET ADDRESS
401-150TH AVE. # 233
CITY-ST-ZIP
MADEIRA BCH FL 33708

TITLE
NAME
D
MANNING, JOHN
STREET ADDRESS
401-150TH AVE. # 242
CITY-ST-ZIP
MADEIRA BCH. FL 33708

TITLE
NAME
D
FRENCH, ROBERT
STREET ADDRESS
401-150TH AVE. # 266
CITY-ST-ZIP
MADEIRA BEACH FL 33708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
D
JEWELL, KEN
STREET ADDRESS
401-150 AVE. # 245
CITY-ST-ZIP
MADEIRA BEACH, FL 33708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
D
DAKES, LLOYD
STREET ADDRESS
401-150TH AVE, # 246
CITY-ST-ZIP
MADEIRA BEACH, FL 33708

TITLE
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: WILLIAM M. STONER WILLIAM M. STONER 2/9/00 (727) 397-4026

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)