## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## FILED Apr 18, 2002 8:00 am - Secretary of State **DOCUMENT # 769890** 1. Entity Name SAND DOLLAR NORTH CONDOMINIUM ASSOCIATION, INC. 04-18-2002 90413 021 \*\*\*\*61.25 Principal Place of Business Mailing Address 7380 S. OCEAN DRIVE C/O ADVANTAGE PROPERTY MANEGEMENT JENSEN BEACH FL 34957 P.O. BOX 65 BUUNAATRA JENSEN BEACH FL 34958 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 65-0009600 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ROSS, DEBORAH L WACKEEN, CORNETT & GOOGE, P.A. **401 EAST OSCEOLA STREET** City Zip Code STUART FL 34994 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Addition KOVACS, LOUIS NAMÉ NAME STREET ADDRESS 7370 S OCEAN DR 516 STREET ADDRESS CITY-ST-ZIP JENSEN BEACH FL CITY-ST-ZIP 30 TITLE ☐ Delete Change ☐ Addition Stark, Robert 👵 NAME NAME STREET ADDRESS 7370 S OCEAN DR, #B-214 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JENSEN BEACH FL 33495 SD TITLE Delete TITLE Addition COLEMAN, WILLIAM NAME NAME STREET ADDRESS 7380 S OCEAN DR 517 STREET ADDRESS CITY-ST-7IP JENSEN BEACH FL 34957 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Addition NAME LIGHTON, RICHARD NAME STREET ADDRESS 7380 S. OCEAN DR. 518 STREET ADDRESS CITY-ST-ZIP JENSEN BEACH FL 34957 CITY-ST-ZIP Delete TITLE Change ☐ Addition Carter, Bernie NAME STREET ADDRESS 7370 S OCEAN DR STREET ADDRESS CITY-ST-ZIP jensen beach fl CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Kinnie, William NAME 7370 S OCEAN DR 314 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JENSEN BEACH FL CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Seg tion 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 677. Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trustee empowered to execute this report as required by changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #