2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2000 8:00 am
Secretary of State
02-22-2000 90038 032 ****61.25

DOCUMENT # 770150

1. Entity Name

SEASPRAY PERDIDO KEY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
NC. % 16287 PERDIDO KEY DR. PENSACOLA FL 32507	NC. % 16287 PERDIDO KEY DR. PENSACOLA FL 32507

D0023619

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 59-2400805 ☐ 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
TAMPARY, A.T. 16285 PERIDO KEY DR #1025 PENSACOLA FL 32507	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 / STREET ADDRESS / CITY-ST-ZIP	D SMITH, HARRY 6658 MILLSTONE AVE. BATON ROUGE LA 70808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WILSON, JAMES D. 113 HARRIS DRIVE FLORENCE, AL 35634	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEVALAQUE, DOMINIC 4227 N HONEYSUCKLE LANE JACKSON MS 39211	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP GORDON, BETH 16285 PERDIDO KEY DR. #322 PENSACOLA, FL 32507	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUSS, WILLIAM 9600 ROBIN LANE BATON ROUGE LA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP WHITTLE, J. CLAY 2870 ARAWATA LANE MEMPHIS TN 38111	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP A.T. TAMPARY 16285 PERDIDO KEY DR. #1025 PENSACOLA, FL 32507	☐ Delete Add	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRODY, JEAN 1729 FLANGAN STATION Rd. WINCHESTER, KY 40391	☐ Delete Add	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: SIGNATURE REQUIRED A.T. TAMPARY 2.15.00 800.336.726
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #