

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

3/1

FILED
Mar 28, 2003 8:00 am
Secretary of State

03-10-2003 90168 009 *****61.25

DOCUMENT # 771052

1. Entity Name

SILVER COVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

727 VIA TRIPOLI
UNIT A-111
PUNTA GORDA FL 33950

Mailing Address

727 VIA TRIPOLI
UNIT A-111
PUNTA GORDA FL 33950

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **31-1102212**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HALL, ROBERT L
%SILVER COVE CONDO ASSOC INC
727 VIA TRIPOLI UNIT A-111
PUNTA GORDA FL 33950

7. Name and Address of New Registered Agent

Name **Fred Chaisty**
Street Address (P.O. Box Number is Not Acceptable) **121 EAST Charlotte Avenue**
City **Punta Gorda** FL Zip Code **33950**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Fred Chaisty

(NOTE: Registered Agent signature required when reinstating)

3/5/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **WARE, GARY**
STREET ADDRESS **8395-1A HYANNIS PORT DR**
CITY-ST-ZIP **DAYTON OH**

TITLE **VD** ☒ Delete
NAME **GIBSON, JAMES**
STREET ADDRESS **7078 CLAYBECK DRIVE**
CITY-ST-ZIP **HUBER HEIGHTS OH**

TITLE **D** ☒ Delete
NAME **HALL, ROBERT**
STREET ADDRESS **727 VIA TRIPOLI UNIT A-111**
CITY-ST-ZIP **PUNTA GORDA FL**

TITLE **STD** ☒ Delete
NAME **STROLLO, GRACE M**
STREET ADDRESS **727 VIA TRIPOLI A-121**
CITY-ST-ZIP **PUNTA GORDA FL 33950**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **Chaisty, Fred**
STREET ADDRESS **1318 Wesley Drive Unit B 111**
CITY-ST-ZIP **Punta Gorda, FL 33950**

TITLE **D** ☐ Change ☒ Addition
NAME **Richard F. GARNER**
STREET ADDRESS **1318 Wesley Drive A-123**
CITY-ST-ZIP **Punta Gorda, FL 33950**

TITLE **D** ☐ Change ☒ Addition
NAME **Gail Cummins**
STREET ADDRESS **1318 Wesley Drive B-122**
CITY-ST-ZIP **Punta Gorda, FL 33950**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

QUINED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/03

Date

941-505-2522

Daytime Phone #

CR2E037 (10/02)