

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000001361

FILED  
Apr 22, 2003  
Secretary of State

Entity Name: ISLAND PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

600 ISLAND PLACE WAY  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

10033 NINTH STREET NORTH  
2ND FLOOR  
SAINT PETERSBURG, FL 33716

**New Mailing Address:**

FEI Number: 65-1085485      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAMPART PROPERTIES INC  
10033 NINTH STREET NORTH  
2ND FLOOR  
SAINT PETERSBURG, FL 33716

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HORNER, MICHAEL  
Address: 10033 NINTH STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: STD ( ) Delete  
Name: FINLAY, DAVID A  
Address: 10033 NINTH STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D ( ) Delete  
Name: MAYRON, SHAY  
Address: 10033 NINTH STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DALRYMPLE, DAVID  
Address: 10033 NINTH STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D ( ) Change (X) Addition  
Name: ROARK, DREW  
Address: 10033 NINTH STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 337163804

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL HORNER

PD

04/22/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date