

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

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90055 046 ****61.25

DOCUMENT # N02000001311

1. Entity Name

TOPAZ OCEANFRONT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**925 NORTH COURTENAY PARKWAY
MERRITT ISLAND FL 32952**

Mailing Address

**925 NORTH COURTENAY PARKWAY
MERRITT ISLAND FL 32952**

90006955

2. Principal Place of Business

**735 N. HWY A1A
Suite, Apt. #, etc.**

3. Mailing Address

**735 N. HWY. A1A
Suite, Apt. #, etc.**



☒ CHECK HERE IF MAKING CHANGES

City & State

INDIALANTIC, FL.

City & State

INDIALANTIC, FL.

Zip

32903 BREVARD

Zip

32903 BREVARD

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GLASS, GREGORY W.
1800 W. HIBISCUS BLVD., SUITE 138
MELBOURNE FL 32902-1870**

7. Name and Address of New Registered Agent

Name **DONALD K. LIMING**

Street Address (P.O. Box Number is Not Acceptable)

735 N. HWY A1A APT # 501

City **INDIALANTIC**

FL

Zip Code **32903**

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 **Donald K. Liming**

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

(NOTE: Registered Agent signature required when reinstating)

1-16-03

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	KODSKI, MAURICE	
STREET ADDRESS	P.O. BOX 320637	
CITY-ST-ZIP	COCOA BEACH FL 32932-0637	
TITLE	SD	☒ Delete
NAME	KING, BRENDA	
STREET ADDRESS	P.O. BOX 320637	
CITY-ST-ZIP	COCOA BEACH FL 32932-0637	
TITLE	TD	☒ Delete
NAME	KODSI, ROBERT	
STREET ADDRESS	P.O. BOX 320637	
CITY-ST-ZIP	COCOA BEACH FL 32932-0637	
TITLE	PRESIDENT	☐ Delete
NAME	HERB HARVIS	☒ ADDITION
STREET ADDRESS	735 N. HWY A1A # P-1	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE	VICE PRESIDENT	☐ Delete
NAME	LOU SCHWEFFERMAN	☒ ADDITION
STREET ADDRESS	735 N. HWY A1A # 406	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE	SECRETARY-TREASURER	☐ Delete
NAME	DONALD K. LIMING	☒ ADDITION
STREET ADDRESS	735 N. HWY A1A # 501	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	DOMINIC DERUSSO	
STREET ADDRESS	735 N. HWY A1A # 206	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	MICHAEL BAIKER	
STREET ADDRESS	735 N. HWY A1A # 301	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	JOHN WITTLER	
STREET ADDRESS	735 N. HWY A1A # 404	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	RAUPH-DUMKE	
STREET ADDRESS	735 N. HWY A1A # 572	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	RICHARD SHER	
STREET ADDRESS	735 N. HWY A1A # 505	
CITY-ST-ZIP	INDIALANTIC, FL. 32903	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (10/02)

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: **Donald K. Liming** 1/16/03 321-723-2173

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR