

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 11, 2008 8:00 am**  
**Secretary of State**

03-11-2008 90017 038 \*\*\*\*61.25

**DOCUMENT # N03000001492**

1. Entity Name

UBP CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

2201 NE COACHMAN ROAD  
CLEARWATER FL 33765

Mailing Address

1831 N. BELCHER RD.  
SUITE G-3  
CLEARWATER FL 33765  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

20-0027318

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

R. CARLTON WARD  
1253 PARK STREET  
CLEARWATER FL 33756

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

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**

**Due By May 1, 2008**

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  
NAME BUGG, ROBERT ☐ Delete  
STREET ADDRESS 2201 NE COACHMAN RD. #201  
CITY-ST-ZIP CLEARWATER FL 33765

TITLE STD ☒ Delete  
NAME PARK, JOSEPH  
STREET ADDRESS 2201 NE COACHMAN RD #200  
CITY-ST-ZIP CLEARWATER FL 33765

TITLE VPD ☐ Delete  
NAME RUSSELL, JACK  
STREET ADDRESS 2201 NE COACHMAN RD #100  
CITY-ST-ZIP CLEARWATER FL 33765

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE STD ☐ Change ☒ Addition  
NAME Timothy Ingram  
STREET ADDRESS 2201 NE Coachman Rd, #102  
CITY-ST-ZIP Clearwater, FL 33765

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

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 exemptions contained in Section 119, 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]*

2/21/08