

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90720 008 ****61.25

DOCUMENT # N03424 1. Entity Name SAND PEBBLE POINTE III CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business % SEABOARD ARBORS 5313 LOCUST PLACE NEW PORT RICHEY FL 34652 US			Mailing Address % SEABOARD ARBORS 5313 LOCUST PLACE NEW PORT RICHEY FL 34652 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
LEIGHTON, LENNARD A. 2189 CLEVELAND ST SUITE 225 CLEARWATER FL 33765				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, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	NELSON, EUGENE		NAME		
STREET ADDRESS	4550 BAY BLVD #1253		STREET ADDRESS		
CITY-ST-ZIP	PT RICHEY FL		CITY-ST-ZIP		
TITLE	VD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	BOBLITT, BONNIE		NAME	Zedan, Thomas	
STREET ADDRESS	4620 BAY BLVD #1121		STREET ADDRESS	4550 Bay Blvd. #1242	
CITY-ST-ZIP	PORT RICHEY FL 34668		CITY-ST-ZIP	Port Richey, FL 34668	
TITLE	SD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	CHRISTEIN, MARGARETHE-		NAME	Sacchetti, Augusto	
STREET ADDRESS	4620 BAY BLVD #1156		STREET ADDRESS	4950 Bay Blvd #1241	
CITY-ST-ZIP	PORT RICHEY FL 34668		CITY-ST-ZIP	Port Richey, FL 34668	
TITLE	TD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	HEITER, ELEYNE		NAME	Olsen, Morris	
STREET ADDRESS	4550 BAY BLVD #1228		STREET ADDRESS	4650 Bay Blvd. #1055	
CITY-ST-ZIP	PORT RICHEY FL 34668		CITY-ST-ZIP	Port Richey, FL 34668	
TITLE	D	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	FIKSE, JOHN		NAME	SD	
STREET ADDRESS	4550 BAY BLVD #1248		STREET ADDRESS		
CITY-ST-ZIP	PORT RICHEY FL 34668		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <i>Eugene R. Nelson</i>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR EUGENE R. NELSON		
			Date 4/13/04		
			Daytime Phone # 846-7028		

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MOORE CR2E037 (11/03)

4. FEI Number **59-2552045** Applied For ☐ Not Applicable ☐

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

FL Zip Code