

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

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90660 003 ****61.25

DOCUMENT # N05623

1. Entity Name

ISLAND CHATEAU CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**160 COLUMBIA DRIVE
TAMPA FL 33606**

Mailing Address

**160 COLUMBIA DRIVE
TAMPA FL 33606**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2919957**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ALMENGUAL, MARTHA
160 COLUMBIA DR
#303
TAMPA FL 33606**

7. Name and Address of New Registered Agent

Name

JOYCE A. PFEIFFER

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

3809 N. GAY DR.

City

TAMPA

FL

Zip Code

33611

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

Joyce A. Pfeiffer

3-14-03

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

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 NAME STREET ADDRESS CITY-ST-ZIP	VD BAHN, CHERYL 160 COLUMBIA DRIVE #407 TAMPA FL 33606	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALMENGUAL, MARTHA 160 COLUMBIA DR TAMPA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOACH, SUE 160 COLUMBIA DRIVE #505 TAMPA FL 33606	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LATTER, NETTIE M. 160 COLUMBIA DRIVE TAMPA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUSSELL, SHARON 160 COLUMBIA DR TAMPA FL 33606	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert Waldrup, Treas. 160 Columbia Dr. Tampa, FL 33606	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

Sharon Russell

3-13-03

(813) 251-8251

CR2E037 (10/02)