

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

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90221 016 ****61.25

DOCUMENT # N07543

1. Entity Name

THE CASTAWAY COVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**3901 DIXIE HWY. N.E.
PALM BAY FL 32905-3647**

Mailing Address

**3901 DIXIE HWY. N.E.
PALM BAY FL 32905-3647**

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 **59-2475912**

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

**GENOW, DAVID
3901 DIXIE HWY NE
#501
PALM BAY FL 32905**

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

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	D	☒ Delete
NAME	ROMAINE, WARREN	
STREET ADDRESS	3901 DIXIE HWY NE # 208	
CITY-ST-ZIP	PALM BAY FL 32905	
TITLE	PD	☐ Delete
NAME	GENOW, DAVID	
STREET ADDRESS	3901 DIXIE HWY #501	
CITY-ST-ZIP	PALM BAY FL 32905	
TITLE	VD	☐ Delete
NAME	HOGAN, ROBERT	
STREET ADDRESS	3901 DIXIE HWY #106	
CITY-ST-ZIP	PALM BAY FL 32905	
TITLE	TD	☒ Delete
NAME	TAYLOR, JOSEPH	
STREET ADDRESS	3901 DIXIE HWY #102	
CITY-ST-ZIP	PALM BAY FL 32905	
TITLE	SD	☒ Delete
NAME	NEESE, ELENOR	
STREET ADDRESS	3901 DIXIE HWY #406	
CITY-ST-ZIP	PALM BAY FL 32905	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VD	☐ Change ☒ Addition
NAME	DUBRISKE, Robert	
STREET ADDRESS	3901 Dixie Hwy NE #409	
CITY-ST-ZIP	Palm Bay, FL 32905	
TITLE	TD	☐ Change ☒ Addition
NAME	Barrett, William	
STREET ADDRESS	3901 Dixie Hwy NE #107	
CITY-ST-ZIP	Palm Bay, FL 32905	
TITLE	SD	☐ Change ☒ Addition
NAME	Ledoux, Lucille	
STREET ADDRESS	3901 Dixie Hwy NE #405	
CITY-ST-ZIP	Palm Bay, FL 32905	
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 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: **R. H. HOGAN** REQUIRED

2-12-03

CR2E037 (10/02)