# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 03, 2001 8:00 am**
**Secretary of State**
05-03-2001 90073 024 ****61.25

DOCUMENT # N09713

1. Entity Name

NAUTILUS COMMUNITY ASSOCIATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 660 NAUTILUS CT.<br>FT. WALTON BCH. FL 32548 | 660 NAUTILUS CT.<br>FT. WALTON BCH. FL 32548 |

DO NOT WRITE IN THIS SPACE

| 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 59-2554205 ☐ 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 |
|---|---|
| ATCHISON, GLENN B<br>660 NAUTILUS CT<br>FT WALTON BCH FL 32548 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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.

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 Department of State** |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>LEMON, LEWIS<br>660 NAUTILUS CRT #2610<br>FT WALTON BCH FL 32548 | ☐ Delete | P/D<br>Lewis Lemon<br>660 Nautilus Crt.<br>Ft. Walton Beach, FL 32548 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>MASCARA, JOE<br>660 NAUTILUS CRT #1601<br>FT WALTON BEACH FL 32548 | ☐ Delete | T/D<br>Mascara, Joe<br>660 Nautilus Crt.<br>Ft. Walton Beach, FL 32548 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>YELL, GEORGE<br>660 NAUTILUS COURT<br>FT. WALTON BEACH FL 32548 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SCHMIDT, HANS<br>660 NAUTILUS COURT<br>FORT WALTON BEACH FL 32548 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>MCGARITY, DAN<br>660 NAUTILUS COURT<br>FORT WALTON BEACH FL 32548 | ☒ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | AS<br>ATCHISON, GLENN<br>600 NAUTILUS COURT<br>FT. WALTON BEACH FL | ☐ Delete | | ☐ Change ☐ Addition |

CR2E037 (10/00)

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:** SIGNATURE REQUIRED 4-27-01 850-244-9862
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #