

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90057 044 ****61.25

DOCUMENT # N11238

1. Entity Name

THE OCEAN AT THE BLUFFS SOUTH CONDOMINIUM ASSOCI

Principal Place of Business

Mailing Address

900 E. INDIANTOWN RD. #210
 PO BOX 4398
 JUPITER FL 33477

900 E. INDIANTOWN RD. #210
 PO BOX 4398
 JUPITER FL 33477-5153



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2620281

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CAMPBELL, THERESA
900 E. INDIANTOWN RD. #210
JUPITER FL 33477

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.

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 Delete
 NAME **PD TAGGART, JAMES R**
 STREET ADDRESS **501 SOUTH SEAS DRIVE, #105**
 CITY-ST-ZIP **JUPITER FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TD ZIEN, AL**
 STREET ADDRESS **601 S SEAS DRIVE #101**
 CITY-ST-ZIP **JUPITER FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **SD PIZZOLO, RACHEL**
 STREET ADDRESS **401 SOUTH SEAS DRIVE, #203**
 CITY-ST-ZIP **JUPITER FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VPD FRANK PENNISI**
 STREET ADDRESS **201 S SEAS DR #506**
 CITY-ST-ZIP **JUPITER FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **SUTTON, JAMES**
 STREET ADDRESS **101 SO SEAS DR #105**
 CITY-ST-ZIP **JUPITER, FL 33477**

TITLE Delete
 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: _____

Frank Pennisi
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #