

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90005 046 ****61.25

DOCUMENT # N11782

1. Entity Name

THE 7TH AVENUE BUSINESS CONDOMINIUM OWNERS' ASSO

(LA)

Principal Place of Business

**% MARK KELLY
 1718 E 7TH AVE. STE. 301
 TAMPA FL 33605
 US**

Mailing Address

**% MARK KELLY
 1718 E 7TH AVE. STE. 301
 TAMPA FL 33605
 US**



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

NOT APPLICABLE

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

**KELLY, MARK F
 1718 E 7TH AVE, STE. 301
 TAMPA FL 33605**

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
 After September 12, 2001, min. will be \$236.25**

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: PD
 NAME: GUYTON, BARBARA Delete
 STREET ADDRESS: 1726 E 7TH AVE.
 CITY-ST-ZIP: TAMPA FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: TSD
 NAME: KELLY, MARK F Delete
 STREET ADDRESS: 1718 E 7TH AVE STE 301
 CITY-ST-ZIP: TAMPA FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: D
 NAME: MCKEE, ROBERT Delete
 STREET ADDRESS: 1718 E 7TH AVE, STE. 301
 CITY-ST-ZIP: TAMPA FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: VPD
 NAME: GUYTON, ROBERT Delete
 STREET ADDRESS: 1726 E 7TH AVE.
 CITY-ST-ZIP: TAMPA FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: D
 NAME: ROBERT SAITTA Delete
 STREET ADDRESS: 1728 E 7TH AVE
 CITY-ST-ZIP: TAMPA FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 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: MARK F. KELLY 9/12/01 813-248-6400

CR2E037 (5/01)