2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 05, 2001 8:00 am Secretary of State **DOCUMENT # N21491** 1. Entity Name AVON BY THE SEA RESIDENTS' ASSOCIATION INC. 03-05-2001 90286 045 ****61.25 Principal Place of Business Mailing Address 310 MCKINLEY AVE. 5930 RIDGEWOOD AVE. COCOA BEACH FL 32931 しひひんりんわか COCOA BEACH FL 32931 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2849098 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required Ų 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DUROCHER, JAMES 310 MCKINLEY AVE COCOA BEACH FL 32931 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing FILE NOW: **\$5.00** May Be Trust Fund Contribution. П Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition PD Change Delete TITLE TITLE WALDEN, STAN NAME NAME 216 ROOSEVELT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL ☐ Addition Change TITLE ☐ Delete TITLE SHERLOCK, JANICE NAME NAME STREET ADDRESS STREET ADDRESS 5930 RIDGEWOOD CITY-ST-ZIP-CITY-ST-ZIP COCOA BEACH FL -- -☐ Change Addition ☐ Delete TITLE TITLE **NELSON, MARK** NAME NAME STREET ADDRESS STREET ADDRESS 207 ARTHUR AVE CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL Change ☐ Addition ☐ Delete TITLE TITLE DUROCHER, JIM NAME NAME STREET ADDRESS STREET ADDRESS 310 MCKINLEY AVENUE CITY-ST-ZIP CITY-ST-7IP **COCOA BEACH FL** Rec Secretary ☐ Delete TITLE ☐ Change Addition TITLE Nancie Leto 416 Ridgewood Ave NAME NAME STREET ADDRESS STREET ADDRESS Cocoa Beach FL 32931 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

Fredsurer 2-22-01 721-784-2452