2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25656 SEA ISLAND NORTH CONDOMINIUM III, INC. Principal Place of Business Mailing Address 770 ISLAND WAY. 770 ISLAND WAY CLEARWATER FL 33767 **CLEARWATER FL 33767** 2. Principal Place of Business 3. Mailing Address

FILED Feb 26, 2002 8:00 am Secretary of State

02-26-2002 90148 037 ****61.25



Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & Stat			City & State				· · · · · · · · · · · · · · · · · · ·			noticed Com	
City & State			City & State			4. FEI Number 59-2096526				pplied For lot Applicable	
Zip Country			Zip Co		ountry 5. Certificate of Str		satus Desired 7 \$8.75		8.75 Ad	Iditional	
	6. Name a	nd Address of Current Reg	istered Agent			7. Name and Add	dress of New Register	ed Aç	jent		
				Nam	ie				à		
OLODAN MUDICI					Street Address (P.O. Box Number is Not Acceptable)						
GURRAN, MURIEL 770 ISLAND WAY											
Second.											
GLEARWATER FL 33767								FL	Zip Cod	de	
The above named entity submits this statement for the purpose of changing its regis							• -]		
8. The above	named entity s	submits this statement for the	purpose of changing its	registerea offic	e or registe	red agent, or both, in	the state of Florida.				
4,											
SIGNATURE			·								
	Signature, typed or	printed name of registered agent and tit	e if applicable. (NOTE	: Registered Agent s	ignature require	d when reinstating)	, DA	TE			
	115 11										
FILE NOW: FEE IS \$61.25 9. Election Campaign							Make Check Payable to				
	,		Trust Fund C	ontribution.,		Added to Fees	Departi	ment	of Stat	8	
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TITLE	PD	, , OFFICERS AND DIRECT		11.		ADDITIONS/CHANG	IES TO OFFICERS AND		_		
NAME	CURRAN, M	I IDIEL H	☐ Delete	TITLE NAME			•	Į	Change	Addition	
STREET ADDRESS	770 ISLAND			STREET ADDRE	SS						
CITY-ST-ZIP	CLEARWATE			CITY-ST-ZIP					-		
TITLE	VPD		☐ Delete	TITLE	- - 			ſ	Change	☐ Addition	
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NAME	SMITH, HER	BERT		NAME	HER	B SMITH TSLAND W		•			
STREET ADDRESS	770 ISLAND			STREET ADDRE	SS 776	ISLAND U	DAY #301				
CITY-ST-ZIP	CLEARWATE	R FL 33767		CITY-ST-ZIP	CL	EAR WATER	FL 33767				
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NAME	TROUTNER,			NAME	77	O Talaisi	A Care Mark				
STREET ADDRESS	770 ISLAND			STREET ADDRE	SS /	- JUKANYU	144 E 304				
CITY-ST-ZIP	CLEARWATE	R FL 33767		CITY-ST-ZIP		EARWATER,	P. FL 33767 ICHAEL)AY # 304 FL 33767		<u></u>		
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1	MYERS, LOU		•	NAME STREET ADDRE	777	Telair)N)A., // la/				
STREET ADDRESS CITY-ST-ZIP	770 ISLAND			CITY-ST-ZIP	∞ //b	TOWNE W	JHY # 10(_			
	CLEARWATE	H FL 33/6/		-	- C:LE	AKWATER,	N DAY 4 101 FL 3376-7				
TITLE NAME			☐ Delete	TITLE NAME				L	Change	Addition	
STREET ADDRESS				STREET ADDRE	ss						
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	cortify that the in	nformation supplied with this	filing doos not qualify for		-1	-N 110 07(0)() FI					

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

MURIEL CURRAN