

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 18, 2002 8:00 am
Secretary of State

02-18-2002 90134 049 ****61.25

DOCUMENT # N26571

1. Entity Name

BAHIA SOUND HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**8385 SE KETCH CT.
 HOBE SOUND FL 33455**

**8385 SE KETCH CT.
 HOBE SOUND FL 33455**

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

65-0153351

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

**PREMAN, EDWARD S.
 8385 SE KETCH CT.
 HOBE SOUND FL 33455**

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 **D SPADARO, ANTHONY**
 STREET ADDRESS **7992 SE WINDTAMMER WAY**
 CITY-ST-ZIP **HOBE SOUND FL 33455**

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

TITLE ☒ Delete
 NAME **D DAVINO, RALPH**
 STREET ADDRESS **8023 SE WINDJAMMER WAY**
 CITY-ST-ZIP **HOBE SOUND FL**

TITLE ☐ Change ☒ Addition
 NAME **DIRECTOR**
 STREET ADDRESS **GINGER LEE**
 CITY-ST-ZIP **8369 SE KETCH COURT
 HOBE SOUND, FL 33455**

TITLE ☐ Delete
 NAME **D PREMAN, ED**
 STREET ADDRESS **8385 SE KETCH COURT**
 CITY-ST-ZIP **HOBE SOUND FL**

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

TITLE ☐ Delete
 NAME **D SALUJA, K.R. DEEP**
 STREET ADDRESS **7975 SE WINDJAMMER WAY**
 CITY-ST-ZIP **HOBE SOUND FL**

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

TITLE ☐ Delete
 NAME **D BURGER, ROBERT**
 STREET ADDRESS **7831 SE WINDJAMMER WAY**
 CITY-ST-ZIP **HOBE SOUND FL 33455**

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

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.

EDWARD S. PREMAN

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/02

(561) 546-0302
 Daytime Phone #

CR2E037 (9/01)