

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90499 027 *****61.25

DOCUMENT # N28972

1. Entity Name

THE HAMPTONS TOWNHOME BUILDING K ASSOCIATION, IN C.



Principal Place of Business

**3298 SUMMIT BLVD.
SUITE 4
PENSACOLA FL 32503**

Mailing Address

**3298 SUMMIT BLVD.
SUITE 4
PENSACOLA FL 32503**

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 **59-3093780**

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

**ETHERIDGE, KEVIN
3298 SUMMIT BLVD.
SUITE 4
PENSACOLA FL 32503**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	IT	<input type="checkbox"/> Delete
NAME	DUNAYER, JOSEPH	
STREET ADDRESS	601 E BURGESS ROAD D-3	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	PD	<input type="checkbox"/> Delete
NAME	NADOLNY, WILLIAM	
STREET ADDRESS	601 E. BURGESS RD., #A-3	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCBRIER, MIKE	
STREET ADDRESS	601 EAST BURGESS RD., UNIT J-1	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	WEBER, JAMES	
STREET ADDRESS	601 E BURGESS RD. #D-7	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	D	<input type="checkbox"/> Delete
NAME	STRADER, RUTH	
STREET ADDRESS	601 EAST BURGESS B-3	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	strader, Ruth	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D	
STREET ADDRESS	Watson, MAX	
CITY-ST-ZIP	601 E Burgess Rd #I-6 Pensacola, FL 32504	

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:

SIGNATURE REQUIRED

CR2E037 (10/02)