

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90447 045 ****61.25

DOCUMENT # N31049

1. Entity Name

SUNSET REEF HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O CMG
 5530 1ST AVE N
 SAINT PETERSBURG FL 33710
 US

% CONDOMINIUM MANAGEMENT GROUP, INC.
 PO BOX 47068
 ST PETERSBURG FL 33743-7068

00043006



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

59-3035424

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

LISHEID, DEBRA R
5530 1ST AVE N
ST PETE FL 33110

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 NAME STREET ADDRESS CITY-ST-ZIP	VPD LANGE, LARRY 17960 GULF BLVD #205 SAINT PETERSBURG FL 33708	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOVELLY, JOE 17960 GULF BLVD 202 REDINGTON SHORES FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WISLOE, JAY H JR 17960 GULF BLVD #205 SAINT PETERSBURG FL 33708	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUEST, JOHNNIE 17960 GULF BLVD, #208 REDINGTON SHORES FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PEADO, LORRAINE 17960 GULF BLVD #205 REDINGTON SHORES FL 33708	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD D.F. Buchholz 17960 Gulf Blvd. #107 Redington Shores FL 33708	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Ruth Lebowitz 17960 Gulf Blvd #205 Redington Shores FL 33708	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Vilma Douglas 17960 Gulf Blvd #220 Redington Shores FL 33708	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Carol Lange 17960 Gulf Blvd. #217 Redington Shores FL 33708	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Mary Ethington 17960 Gulf Blvd #123 Redington Shores FL 33708	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS 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:

Debra R. Lisheid

3/23/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)