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

DOCUMENT # N31871

1. Entity Name

ISLAND DUNES OCEANSIDE II CONDOMINIUM ASSOCIATIO



FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90189 049 ****61.25

N, INC.			A SOUTH THE SECOND			
Principal Place of Business Mailing Address		Mailing Address 8800 S. OCEAN DR., UNIT 410				
8800 S. OCEAN JENSEN BEACH		JENSEN BEACH FL 34957)	ii bibii bibii bibii bibii	(1881 1881
2. Principal Place of Business 3.		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 85-0142129 Applied For Not Applicable		Applicable
Zip	Country		Country	5. Certificate of Status Desired	\$8.75 Addit	
	6. Name and Address of Current	Registered Agent	Nesse	7. Name and Address of New Registe	red Agent	
				OBERT FRISA	 -	
O'MALLEY, JACK			Street Address (P.O. Box Number is Not Acceptable)			
8800 S OCEAN DR				so so DAN 02.	<u> </u>	
JENSEN B	BEACH FL 34957		City TY	NSEN BEACH	FL Zip Code	05-
		- the of changing its root	stored office or regist	ered agent, or both, in the State of Florida.	am familiar with, a	and accept
The above the obligation	named antity submits this statement to ons of registered agent.	or the purpose of changing its regi	stered office of regist	ered agent, or both, in the class of temper.	•	·
\/	V(1+1+.	· 'Dane	<u>~</u> 1 1	2D16A 71	11/02	
SIGNATURE _	11 mad	ML KOBEI	CI 1.	KISH 24	<u>11 03 </u>	
SIGNATURE =	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	istered Agent signature requir	red when reinstating) C	DATE /	
F	FILE NOW: FEE IS \$61.25	9. Election Campai Trust Fund Contr		Added to Fees Florida De	heck Payable tepartment of S	tate
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PD	☐ Delete	LILTE B.		Change	Addition Addition
NAME	O'MALLEY, JACK			OIS BURGER		
STREET ADDRESS	8800 S OCEAN DR		STREET ADDRESS CITY-ST-ZIP			
CITY-ST-ZIP	JENSEN BEACH FL 34957 VD		TITLE		<u></u> Change	Addition
TITLE	CALCAVECCHIO, DICK	☐ Delete		NNY FERZO	~	
NAME STREET ADDRESS	8800 S OCEAN DR		STREET ADDRESS	A LEKKO		
CITY-ST-ZIP	JENSEN BEACH FL 34957		CITY-ST-ZIP			
TITLE	TD	☐ Delete	III EL	O	≥ €hange	Addition Addition
NAME	THIEMANN, WALT	1		HN DYKE		
STREET ADDRESS	8800 S OCEAN DR		STREET ADDRESS			
CITY-ST-ZIP	JENSEN BEACH FL 34957		CITY-ST-ZIP		Change	Addition
	SD DOLLO	☐ Delete	TITLE		☐ Change	
TITLE	ZIMMERMAN, DOUG		NAME			
NAME	LOGGE OF COLLAND					
NAME STREET ADDRESS	8800 S OCEAN DR		STREET ADDRESS CITY-ST-7IP			
NAME	JENSEN BEACH FL 34957		CITY-ST-ZIP		Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	JENSEN BEACH FL 34957	☐ Delete	CITY-ST-ZIP TITLE	R C215A	□ Change	Additio
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JENSEN BEACH FL 34957 S REAM, CHARLES	☐ Delete	CITY-ST-ZIP TITLE NAME D 3**	B FZISA	□ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	JENSEN BEACH FL 34957	☐ Delete	CITY-ST-ZIP TITLE	B F215A	☐ Change	☐ Addition

12. Thereby 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 of the corporation or the received or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Bi changed, or on an attachment with an address with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

MCINTYRE, THOMAS

8800 S OCEAN DR #102

JENSEN BEACH FL 34957

NAME

STREET ADDRESS

CITY-ST-ZIP

CR2E037 (10/02)