

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N33155

1. Entity Name

SEA BREEZE HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90027 021 ****61.25

Principal Place of Business

Mailing Address

C/O JOEL W. BREWER

~~4922 S. MELROSE AVE~~

~~TAMPA FL 33629~~

US

~~4922 S. MELROSE AVE~~

~~TAMPA FL 33629-5420~~

US

2. Principal Place of Business

120 Baltic Circle

Suite, Apt. #, etc.

3. Mailing Address

120 Baltic Circle

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33606

Country

Hillsborough

Zip

33606

Country

Hillsborough

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BREWER, JOEL W.

~~4922 S. MELROSE AVE.~~

~~TAMPA FL 33610~~

7. Name and Address of New Registered Agent

Name Brewer, Joel W.

Street Address (P.O. Box Number is Not Acceptable)

120 Baltic Circle

City Tampa

FL

Zip Code

33606

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

TITLE PD ☐ Delete
NAME BREWER, JOEL W.
STREET ADDRESS ~~6904 SPENGER CIRCLE~~
CITY-ST-ZIP ~~TAMPA FL~~

TITLE VD ☐ Delete
NAME ANDERSON, DONALD C.
STREET ADDRESS 100 CATALAN BLVD. N.E.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE STD ☐ Delete
NAME BREWER, KARLA J.
STREET ADDRESS ~~4922 S. MELROSE AVE.~~
CITY-ST-ZIP ~~TAMPA FL~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Brewer Joel W.
STREET ADDRESS 120 Baltic Circle
CITY-ST-ZIP Tampa, Florida 33606

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

TITLE STD ☒ Change ☐ Addition
NAME Brewer, Karla J.
STREET ADDRESS 120 Baltic Circle
CITY-ST-ZIP Tampa FL 33606

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

TITLE ☐ Change ☐ Addition
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.

SIGNATURE:

Joel W. Brewer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)