

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90002 003 *****61.25

0008800

DOCUMENT # N38455

1. Entity Name

THE CLUB OF LIVE OAK CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

**1166 PELICAN BAY DR
 DAYTONA BEACH FL 32119
 US**

**1166 PELICAN BAY DR
 S DAYTONA FL 32119
 US**

549298



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

59-3128466

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

**BARKIN, MICHELE
 1166 PELICAN BAY DRIVE
 DAYTONA BEACH FL 32119**

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 **STD** ☐ Delete
 NAME **LEIZEAR, GLEN**
 STREET ADDRESS **148 GRAND OAKS CIRCLE**
 CITY-ST-ZIP **DAYTONA BEACH FL**

TITLE **VPD** ☐ Change ☒ Addition
 NAME **JOYCE SELTZ**
 STREET ADDRESS **120 GRAND OAK Circle**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE **SD** ☒ Delete
 NAME **DUBUKE, JAMES**
 STREET ADDRESS **117 GRAND OAKS CIR**
 CITY-ST-ZIP **DAYTONA BEACH FL**

TITLE **D** ☒ Change ☐ Addition
 NAME **JOHN HAVASI**
 STREET ADDRESS **129 GRAND OAK Circle**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE **VPD** ☒ Delete
 NAME **GROVER, FRED**
 STREET ADDRESS **141 GRAND OAKS CIR**
 CITY-ST-ZIP **DAYTONA BCH FL 32114**

TITLE **D** ☐ Change ☒ Addition
 NAME **ROBERT GANUNG**
 STREET ADDRESS **160 Grand OAK Circle**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE **PD** ☐ Delete
 NAME **LEIZEAR, FRANK**
 STREET ADDRESS **108 GRAND OAKS CIRCLE**
 CITY-ST-ZIP **DAYTONA BEACH FL**

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

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.

SIGNATURE:

SIGNATURE REQUIRED

CR2E037 (10/00)