2002 UNIFORM BUSINESS REPORT (UBR)

5/2'

FILED
Jun 25, 2002 8:00 am
Secretary of State
05-27-2002 90304 005 ****61.25

DOCUMENT # N38527

1. Entity Name

TROPIC SHORES CONDOMINIUM ASSOCIATION OF VOLUSIA COUNTY, INC.

Principal Place of Business	Mailing Address
3111 S ATLANTIC AVE DAYTONA BCH FL 32118	~~AGUNA GUN INVESTMENT~~ ~~PO BOX 2001~~ ~~ORMOND BEACH FL 32174-2021~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	3111 S. Atlantic Ave. Suite, Apt. #, etc.
City & State	City & State: Daytona Beach Shores FL
Zip / Country	Zip: 32118 / Country: Volusia

4. FEI Number: 59-3037141 ☐ 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
CARLSON, DEAN 3 SUNSHINE BLVD ORMOND BEACH FL 32174	Name: Russell Klemm Clayton & McCulloh Street Address (P.O. Box Number is Not Acceptable): The Clayton & McCulloh Bldg. 1065 Maitland Center Commons Blvd. City: Maitland **FL** Zip Code: 32751

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 _____ 4-11-02

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	T WOODS, SHANNON 3 SUSHINE BLVD ORMOND BEACH FL 32174	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Pews, James R. 3 Sunshine Blvd. Ormond Beach, Fl 32174 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SENDELBACH, MARILYN 3835 PLANTATION BLVD LEESBURG FL 34748	☐ Delete D Secretary	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Pews, James R. 3 Sunshine Blvd. Ormond Beach FL 32174 — D Treasurer — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP COHEN, RICHARD 4313 NW 32ND ST GAINESVILLE FL 32605	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EDMUNDSON, MARGARET 652 COATER CIR ALTAMONTE SPRINGS FL 32714	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RISPOLI, FRED 699 SW 59TH ST OCALA FL 34474	President ☐ Delete D	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GALLANT, PAUL 15012 COLLEY DR TAVARES FL 32778	V Pres. ☐ Delete D	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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 4-12-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #