

DOCUMENT # N93000005168

1. Entity Name

BADGER BUILDING CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

444 3RD ST.
NEPTUNE BEACH FL 32266

Mailing Address

444 3RD ST.
NEPTUNE BEACH FL 32266

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 59-3210640

Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STRENTA, JODI L
442 THIRD STREET
NEPTUNE BEACH FL

7. Name and Address of New Registered Agent

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 \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	STRENTA, JODI	
STREET ADDRESS	442 3RD ST.	
CITY-ST-ZIP	NEPTUNE BEACH FL	
TITLE	D	☒ Delete
NAME	GLICKSTEIN, JOSEPH M	
STREET ADDRESS	444 3RD ST.	
CITY-ST-ZIP	NEPTUNE BEACH FL 32266	
TITLE	DVP	☐ Delete
NAME	MCCORMICK, J.T.	
STREET ADDRESS	446 3RD ST.	
CITY-ST-ZIP	NEPTUNE BEACH FL	
TITLE	S	☐ Delete
NAME	WINTRODE, JODI	
STREET ADDRESS	442 3RD STREET	
CITY-ST-ZIP	NEPTUNE BEACH FL	
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☐ Addition
NAME	Morehead, Richard T.	
STREET ADDRESS	444 3rd ST.	
CITY-ST-ZIP	Neptune Beach, FL 32266	
TITLE	D	☐ Change ☐ Addition
NAME	JEAN MCCORMICK	
STREET ADDRESS	318 SAN JUAN DR.	
CITY-ST-ZIP	Ponte Vedra Beach, FL. 32082-1818	
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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/01

Daytime Phone #

FILED
Apr 03, 2001 8:00 am
Secretary of State

03-22-2001 90008 018 ***61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)