

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N94000001863**

1. Entity Name

**JADE EAST TOWERS OWNERS ASSOCIATION, INC.****FILED**  
**Mar 19, 2001 8:00 am**  
**Secretary of State**

03-19-2001 90068 047 \*\*\*\*61.25

0018429

**934004**

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

**1018 E. HIGHWAY 98  
DESTIN FL 32541****1018 E. HIGHWAY 98  
DESTIN FL 32541**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**59-3371709**

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

**SCOTT, WALTER D  
1018 HIGHWAY 98 EAST  
DESTIN FL 32541**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD	MAYFIELD, WILLIAM	1391 WESLEY PARKWAY ATLANTA GA 30327	<input type="checkbox"/> Delete			
	STD	PETRUSEK, MARTIN	1619 OAK HILL ROAD MEMPHIS TN 38138	<input type="checkbox"/> Delete			
	D	CLUCK, ED	1018 HWY 98 E DESTIN FL 32541	<input type="checkbox"/> Delete			
	VD	WATSON, PAUL	620 WILDWOOD DRIVE GREENVILLE MS 38701	<input type="checkbox"/> Delete			
	D	AWBREY, MARK	1018 HWY 98 E DESTIN FL 32541	<input type="checkbox"/> Delete			
				<input type="checkbox"/> Delete			

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:

**MARTIN PETRUSEK**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)