- 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9400005615 1. Entity Name

SEAGULL BAY PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

16761 SEAGULL BAY CT BOKEELIA EL 33022

16761 SEAGULL BAY COURT

US	L 00022		DONI	LUJA FL 33322			1 1890161 016 18	ili Bibil Ballı Ballı	IL BAIN BUNT UNIO ANG	: !! !!! ! ! !!! ! !!! !	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
				City & State Bokeelia, FL			4. FEI Number 65-0734198 Applied For Not Applicable				
				Zip Cour 33922 Le		5. Certificate of		status Desired			
6. Name and Address of Current Registere				ed Agent		7. Name and Address of New Registered Agent					
SCHWANDT, HUGO 16713 SEAGULL BAY CT BOKEELIA FL 33922						Street Address (P.O. Box Number is Not Acceptable)					
					City				FL Zip Coo	de	
SIGNATURE		submits this statement for	<u> </u>		Registered Agent signal	_			DATE		
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees		Check Payable rtment of Stat		
10.	<u>,</u>	OFFICERS AND DI	RECTORS		11.	Α	DDITIONS/CHANGE	S TO OFFICERS AI	ND DIRECTORS IN	V 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	16651 SE	OT, HUGO AGULL BAY CT 1 FL 33922		☐ Delete	THILE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Hann, St 8231 Maii Bokeelia			Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Salı 144	e President mi, Debra 52 Pond Plac ksonville, F		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		I, WAYNE AGULL BAY CT . FL 33922		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trea Hol: 1670	asurer ly Richardso Ol Seagull E eelia, FL 33	n Say Court	Change	☑ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	15 -			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		☐ Change	Addition	

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.

HOLLY RICHARDSON

SIGNATURE: 2/6/02 941 283-0646

FILED

Feb 21, 2002 8:00 am Secretary of State

02-21-2002 90173 029 ****61.25