

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90119 047 ****61.25

DOCUMENT # **N95000006022**

1. Entity Name

REGENCY ISLAND DUNES ASSOCIATION, INC.



Principal Place of Business

**8650 S OCEAN DR
JENSEN BEACH FL 34957
US**

Mailing Address

**8650 S OCEAN DR
JENSEN BEACH FL 34957
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0635079**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**JANES, RICHARD PRES
8650 S. OCEAN DR
#505
JENSEN BEACH FL 34957**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	CHANGE	ADDITION
VP	AVERY, CHARLES	8600 S OCEAN DR 1105	JENSEN BEACH FL 34957	<input checked="" type="checkbox"/>	D	AVERY, CHARLES	8600 S. OCEAN DR 1105	JENSEN BEACH, FL, 34957	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SEC	SHOWCROFT, LOU	8650 S OCEAN DR 703	JENSEN BEACH FL 34957	<input type="checkbox"/>	VP	KNOSKA, JAMES	8600 S OCEAN DR 404	JENSEN BEACH, FL 34957	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	PEARSON, DEBORAH	8650 S OCEAN DR 1001	JENSEN BEACH FL 34957	<input type="checkbox"/>	D	TALAC, KENNETH	8600 S. OCEAN DR, 402	JENSEN BEACH, FL 34957	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	SCHMITT, ED	8600 S OCEAN DR 1001	JENSEN BEACH FL 34957	<input checked="" type="checkbox"/>	D	BROWN, ROBERT	8650 S. OCEAN DR, 1101	JENSEN BEACH, FL 34957	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	GUTHRIE, LEW	8650 S OCEAN DR PH1	JENSEN BEACH FL 34957	<input checked="" type="checkbox"/>	D	RASMUSSEN, BILL	8600 S. OCEAN DR, 606	JENSEN BEACH, FL 34957	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T	REYNOLDS, JOHN	8600 S OCEAN DR	JENSEN BEACH FL 34957	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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: *Patricia Reynolds* Mar. 3-3-03 772-229-0811

CR2E037 (10/02)