2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2001 8:00 am
Secretary of State
04-28-2001 90008 045 ****61.25

0075101

DOCUMENT # N96000003585

1. Entity Name

BAY POINTE VISTA III CONDOMINIUM ASSOCIATION, IN

Principal Place of Business	Mailing Address
210 HIDDEN BAY DRIVE OSPREY FL 34229 US	~~210 HIDDEN BAY DRIVE~~ ~~OSPREY FL 34229~~ ~~US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	c/o CPA PROP. MGMT
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. BOX 20096
City & State	City & State SARASOTA, FL
Zip / Country	Zip 34276 / Country US

4. FEI Number 65-0556019 ☐ 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
~~SEIDER, WILLIAM M~~ ~~200 S. ORANGE~~ ~~SARASOTA FL 34230~~	Name DIANE WATERS Street Address (P.O. Box Number is Not Acceptable) 5322 DUNCANWOOD DR. City SARASOT FL Zip Code 34232

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 Diane Waters, MGR 4/11/01
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	DPS D'AGOSTINO, KEN 210 HIDDEN BAY DRIVE OSPREY FL 34229	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD EDWARDS, GEORGE M.L. 242 HIDDEN BAY DR # 503 OSPREY, FL 34229	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVPT GEBHARD, DIETER 210 HIDDEN BAY DRIVE OSPREY FL 34229	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP PETITO, VICTOR B. 242 HIDDEN BAY DR. # 404 OSPREY, FL 34229	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS PARSONS, KEN C 210 HIDDEN BAY DRIVE OSPREY FL 34229	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST SPEARS, RICHARD 242 HIDDEN BAY DR # 502 OSPREY, FL 34229	☐ 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		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 4-11-01 9413773171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #