

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

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90027 028 \*\*\*\*61.25

**DOCUMENT # N96000004241**

1. Entity Name

**EDEN PINES COLONY PROPERTY OWNERS ASSOCIATION, I  
NC.**



Principal Place of Business

**LORD OF THE SEAS  
KEY DEER BLVD  
BIG PINE KEY FL 33043  
US**

Mailing Address

**PO BOX 430196  
BIG PINE KEY FL 33043  
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 **65-0695029**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**HOWARD, MERKEL L  
540 KEY DEER BLVD  
BIG PINE KEY FL 33043**

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

TITLE **T** ☐ Delete  
NAME **MERKEL, HOWARD L.**  
STREET ADDRESS **2912 CEDAR DR.**  
CITY-ST-ZIP **BIG PINE KEY FL 33043**

TITLE **D** ☐ Delete  
NAME **BLEICH, HOWARD**  
STREET ADDRESS **29287 CYPRESS DR**  
CITY-ST-ZIP **BIG PINE KEY FL 33043**

TITLE **P** ☒ Delete  
NAME **SANDY, ARCHER**  
STREET ADDRESS **1614 GARDENIA LN**  
CITY-ST-ZIP **BIG PINE KEY FL 33043**

TITLE **D** ☐ Delete  
NAME **BARRON, DANIEL**  
STREET ADDRESS **1645 FERN AVE**  
CITY-ST-ZIP **BIG PINE KEY FL 33043**

TITLE **D** ☐ Delete  
NAME **SFORZA, MIKE**  
STREET ADDRESS **1881 NARCISSUS AVE**  
CITY-ST-ZIP **BIG PINE KEY FL 33043**

TITLE **S** ☒ Delete  
NAME **FLORENCE, BOYLE**  
STREET ADDRESS **29210 COCONUT PALM DR**  
CITY-ST-ZIP **BIG PINE KEY FL 33043**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **President** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME **1ST VP**  
STREET ADDRESS **4444 Johnson**  
CITY-ST-ZIP **29189 CEDAR DR**  
**BIG PINE KEY FL 33043**

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**

**4/25/03**

**305-872-8998**

CR2E037 (10/02)