

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000005635

FILED  
Apr 23, 2003  
Secretary of State

**Entity Name:** SUNWATCH ON ISLAND ESTATES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

670 ISLAND WAY  
CLEARWATER, FL 33767 US

**New Principal Place of Business:**

**Current Mailing Address:**

670 ISLAND WAY  
CLEARWATER, FL 33767 US

**New Mailing Address:**

**FEI Number:** 59-3414476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, BRIAN  
10033 9TH ST N  
SAINT PETERSBURG, FL 33716 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HARRILL, DON  
Address: 10033 9TH ST. N.  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: VPD ( ) Delete  
Name: ROTEN, BOB V  
Address: 10033 9TH STREET N  
City-St-Zip: SAINT PETERSBURG, FL 33716 ST

Title: STD ( ) Delete  
Name: BURWELL, ROBERT  
Address: 10033 9TH STREET N.  
City-St-Zip: SAINT PETERSBURG, FL 33716

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WARN, LARS  
Address: 10033 9TH ST. N.  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: VPD (X) Change ( ) Addition  
Name: GIVENS, BEN  
Address: 10033 9TH STREET N  
City-St-Zip: SAINT PETERSBURG, FL 33716 ST

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARS WARN

PD

04/23/2003

Electronic Signature of Signing Officer or Director

Date