2000 UNIFORM BUSINESS REPORT (UBR) 5,  $\mathtt{FILED}$ DOCUMENT # N97000002457 Jun 06, 2000 8:00 am 1. Entity Name Secretary of State BAY ESTATES NORTH CONDOMINIUM ASSOCIATION, INC. 05-15-2000 90265 005 \*\*\*\*61.25 Principal Place of Business Mailing Address 2002 TERRA CEIA BAY BLVD. 2802 TERRA CEIA BAY BLVD. PALMETTO FL 34221-5957 PALMETTO FL 34221 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. AIA City & State Applied For 4. FEI Number City & State 65-0759516 3cadento Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Mamot Services Inc Street Address (P.O. Box Number -BOWLES: ROBERT-E <u> 430</u> 2802 TERRA CEIA BAY BLVD. -44-PALMETTO FL 34221 Zip Code 3 4 AO.5 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 (NOTE: Pegistered An Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PAUL WESTENDORF 66/6) PO Delete Change ☐ Addition TITLE TITLE PRESIDEN 3118 LIVE DAK LANE ZEHNER, A A -NAME NAME STREET ADDRESS STREET ADDRESS 15933 CLAYTON ROAD PALMETTO, FL. 3422/ CITY-ST-ZIP CITY-ST-ZIP BALLWIN MO 63022-0100 VICE PRESIDENT Change Addition **VD** TITLE TITLE CHARLOTTE MALLER TEPPER, JAMES D NAME NAME 1610 TERRA CEIA BAY BIRBLE STREET ADORESS 15933 CLAYTON ROAD STREET ADDRESS CITY-ST-ZIP PALMETTO, FL 3422 CITY-ST-ZIP BALLWIN MO 63022-0100 TREASURER ☐ Addition **Delete Change** STD TITLE TITLE DENNIS O'MALLEY MCCARTNEY, MIKE NAME NAME 3116 LIVE OAKLANE TDSTREET ADDRESS 2802 TERRA CEIA BAY BLVD STREET ADDRESS PALMETTO, FL 34221 CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 Change SECRETARY Addition ☐ Delete TIFLE SUSAN HITCHCOCK WESSTENDORF, P NAME NAME BITTERRACEIA BAY CIRCLE STREET ADDRESS STREET ADORESS 3118 LIVE OAK LANE CITY-ST-ZIP ALMETTO, FL 34221 CITY-ST-ZIF PALMETTO FL 34221 DIRECTOR Change ☐ Addition TITLE TITLE ☐ Delete EARL WETENKAME NAME 1608 TERRACEIA BAY CIRCLE STREET ADDRESS STREET ADDRESS PALMETTO, FL 3422/ CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TTTLE □ Delete TITLE

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 employers 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 employers.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

WHEE AND THE DEAD OF SIGNING OFFICER OF DIRECTOR

941-758-9454

Daytime Phone #