

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 25, 2002 8:00 am**  
**Secretary of State**

03-25-2002 90131 033 \*\*\*\*61.25

**DOCUMENT # N99000002611**

1. Entity Name

**DRIFTWOOD PLAZA PHASE II CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**3830 HWY A1A S  
12  
MELBOURNE BEACH FL 32951**

**3830 HWY A1A S  
12  
MELBOURNE BEACH FL 32951**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3584852**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MOSLEY, CURTIS R ESQ  
1221 E NEW HAVEN AVE.  
MELBOURNE FL 32901**

*984-3842*

Name **Ronald J. Plank**

Street Address (P.O. Box Number is Not Acceptable)

**3830 S-AIA STE-3**

**Melbourne Bch**

**FL**

Zip Code **32951**

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

*[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 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD**  
NAME **PLANK, RON**  
STREET ADDRESS **3830 HWY A1A S UNIT 3**  
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **VD**  
NAME **SCHULTZ, NIGEL**  
STREET ADDRESS **3830 HWY A1A S UNIT 1**  
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

☒ Delete

TITLE **VD**  
NAME **John Farley**  
STREET ADDRESS **3830 Hwy A1A S Unit**  
CITY-ST-ZIP **Melbourne Bch FL 32951**

☒ Change ☐ Addition

TITLE **STD**  
NAME **REYNOLDS, DON**  
STREET ADDRESS **3830 HWY A1A S UNIT 11**  
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

☐ Delete

TITLE **STD**  
NAME **Sue Plank**  
STREET ADDRESS **3830 Hwy A1A S Unit 3**  
CITY-ST-ZIP **Melbourne Bch FL 32951**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)