

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005721

1. Entity Name

DOWNTOWN COCOA PROPERTY OWNERS ASSOCIATION, INC. *P*

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90018 030 \*\*\*\*70.00

Principal Place of Business

258 BREVARD AVENUE  
COCOA FL 32922

Mailing Address

258 BREVARD AVENUE  
COCOA FL 32922

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

59-3601336

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

LOTANE, TROY R  
200 BREVARD AVENUE  
COCOA FL 32922

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.

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**  
**After September 13, 2000 min. will be \$236.25**

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 ☐ Delete  
NAME VANDERSLICE, HARRISON P  
STREET ADDRESS 258 BREVARD AVENUE  
CITY-ST-ZIP COCOA FL 32922

TITLE PD ☒ Change ☐ Addition  
NAME Roger Sevingny  
STREET ADDRESS 258 Brevard Ave  
CITY-ST-ZIP COCOA, FL 32922

TITLE VD ☐ Delete  
NAME SEVINGNY, ROGER  
STREET ADDRESS 258 BREVARD AVENUE  
CITY-ST-ZIP COCOA FL 32922

TITLE VD ☒ Change ☐ Addition  
NAME HARRISON P. VANDERSLICE  
STREET ADDRESS 258 Brevard Ave  
CITY-ST-ZIP COCOA, FL 32922

TITLE SD ☐ Delete  
NAME DECHRISTOPHER, MIKE  
STREET ADDRESS 258 BREVARD AVENUE  
CITY-ST-ZIP COCOA FL 32922

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

TITLE TD ☐ Delete  
NAME MCCLURE, CHARLES  
STREET ADDRESS 258 BREVARD AVENUE  
CITY-ST-ZIP COCOA FL 32922

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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 life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)