

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

FILED
Jun 02, 2003 8:00 am
Secretary of State

05-05-2003 90342 022 ****61.25

DOCUMENT # N99000006795					
1. Entity Name FLORIDA BAY BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 6988 SW 47TH ST MIAMI FL 33155			Mailing Address 7250 SW 39 TERR MIAMI FL 33155		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 65-0965699	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WESTON, SCOTT 7250 SW 39 TERR MIAMI FL 33155			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 <u><i>[Signature]</i></u> DATE <u>4/14/03</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO TRANE, RUBEN 7250 SW 39 TERR MIAMI FL 33155	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. D BEYCE GOODNATURE 6988 SW 47 STREET MIAMI, FLA. 33155	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD WESTON, SCOTT 7250 SW 39 TERR MIAMI FL 33155	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. D JOHN SCHIEFER 6988 SW 47 ST. MIAMI, FLA. 33155	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PALMER, PAUL 7250 SW 39 TERR MIAMI FL 33155	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVID SWETLAND 6988 SW 47 ST. MIAMI, FLA. 33155	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME 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: <u><i>[Signature]</i></u> WESTON <u>4/14/03</u> <u>305-264-9441</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					

COPY 10/02