

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

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90038 017 ****70.00

DOCUMENT # 751441

1. Entity Name

TRADEWINDS BY THE SEA, INC.



Principal Place of Business

**2029 NORTH OCEAN BLVD.
FORT LAUDERDALE FL 33305**

Mailing Address

**2029 NORTH OCEAN BLVD.
FORT LAUDERDALE FL 33305**

11026684



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2003419**

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

**FLORIDA PROP MGMT
2682 W ABLANCA CIRCLE
DAVIE FL 33328**

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

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 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T Delete
NAME **COSTA, LUIS**
STREET ADDRESS **2029 NORTH OCEAN BLVD #204**
CITY-ST-ZIP **FORT LAUDERDALE FL 33305**

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

S Delete
NAME **FERRER, SHAN**
STREET ADDRESS **2029 N. OCEAN BLVD. #510**
CITY-ST-ZIP **FT LAUDERDALE FL 33305**

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

P Delete
NAME **BRODBECK, GILBERT**
STREET ADDRESS **2029 N. OCEAN BLVD. #405**
CITY-ST-ZIP **FT. LAUDERDALE FL 33305**

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

V Delete
NAME **MCELMEEL, JOYCE**
STREET ADDRESS **2029 N. OCEAN BLVD #306**
CITY-ST-ZIP **FORT LAUDERDALE FL 33305**

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

D Delete
NAME **ZAHERAK, DIANE**
STREET ADDRESS **2029 NORTH OCEAN BLVD.**
CITY-ST-ZIP **FT LAUDERDALE FL 33305**

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

D Delete
NAME **MCELMEEL, JOYCE**
STREET ADDRESS **2029 N OCEAN BLVD #201**
CITY-ST-ZIP **FT LAUDERDALE FL 33305**

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)(l), 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:

GILBERT BRODBECK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GILBERT

BRODBECK

4/26/03

954-

565-6323

CR2E037 (10/02)