

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

DOCUMENT # N-09992  
1. Entity Name  
**A1A CONDOMINIUM ASSOCIATION, INC**



FILED

03 SEP 25 AM 8:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**A1A Condominium Assoc**  
Suite, Apt. #, etc.

3. Mailing Address  
**2780 S Hwy A1A**  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**Melbourne Beach, FL**  
Zip  
**32951**

City & State  
**Brevard**  
Country

4. FEI Number  
**59-2543105**  
Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name  
**Carol L. Osborne**  
Street Address (P.O. Box Number is Not Acceptable)  
**842 Angela Ave Apt A**  
**Rockledge, FL 32955 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 Carol L. Osborne, Mgr. DATE 8-26-03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FEE IS \$61.25  
Initial or Amended UBR**

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**

TITLE **P**  
NAME **Carol D. Coleman**  
STREET ADDRESS **156 Victory Way**  
CITY-ST-ZIP **Melbourne Beach, FL 32951**

TITLE **VP**  
NAME **Leo Kasperek**  
STREET ADDRESS **2761 Ironside Ct**  
CITY-ST-ZIP **Melbourne Beach, FL 32951**

TITLE **T**  
NAME **Norma Eveningred**  
STREET ADDRESS **407 Peace Lane**  
CITY-ST-ZIP **Melbourne Beach, FL 32951**

TITLE **S**  
NAME **Norma Doucette**  
STREET ADDRESS **118 Victory Way**  
CITY-ST-ZIP **Melbourne Beach, FL 32951**

TITLE **D**  
NAME **Karl Peterson**  
STREET ADDRESS **248 Liberty Lane**  
CITY-ST-ZIP **Melbourne Beach, FL 32951**

TITLE **D**  
NAME **Leonard Svoboda**  
STREET ADDRESS **232 Liberty Lane, Mlb Bch, FL**  
CITY-ST-ZIP **Arnie Bates**  
**225 Liberty Ln, Mlb Bch, FL**

**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Carol D. Coleman, CAROL D. COLEMAN DATE 9-24-03 DAYTIME PHONE # 321-223-3472  
Signature and typed or printed name of signing officer or director. Date. Daytime Phone #

CR2E037B (12/02)

9/25