## Apr 27, 2001 8:00 am Secretary of State 04-27-2001 90293 014 \*\*\*\*61.25

## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 702204 1. Entity Name

CRESCENT	TOWERS	ASSOCIATION.	INC.

Principal Place	of Business	Mailing Address							
1035 SEASIDE DRIVE SARASOTA FL 34242		1035 SEASIDE DRIVE SARASOTA FL 34242		110001111					
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FEI Number	4. FEI Number 56-1003781				
Zip	Country	Zip	Country	5. Certificate of	of Status Desired	\$8.75 Add ee Required			
	6. Name and Address of Current I	Registered Agent	I	7. Name and	Address of New Registered A	'			
			Name		<b>3</b>	9			
BRICKLEY, JAMES A 1035 SEASIDE DR			Street A	Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA FL 34242			City		FL	Zip Cod	e e		
2 The above	named entity submits this statement for	r the purpose of changing its	vo sistema di affirma						
o. The above	Harried Ching Submits this Statement for	the purpose of changing its	i registered driice di	registered agent, or bott	i, in the state of Florida.				
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signat	ure required when reinstating)	DATE	7/141	1./_		
	<u>//</u>	(			~				
FILE NOW: FEE IS \$61.25				<b>\$5.00</b> May Be Added to Fees					
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHA	ANGES TO OFFICERS AND DIE	RECTORS IN	I 10		
TITLE NAME	VPD PEDRO, SHIRLEY	☐ Delete	TITLE NAME			☐ Change	☐ Addition		
STREET ADDRESS CITY-ST-ZIP	BOX 2286 RR#2 DUSHORE PA 18614		STREET ADDRESS CITY-ST-ZIP						
TITLE	SD SCHAFCTALL MADILYNI	☐ Delete	TITLE			_⊠, Change	Addition		
NAME STREET AODRESS	SCHAFSTALL, MARILYN 5851 BRAINARD DRIVE		NAME STREET ADDRESS						
CITY-ST-ZIP	SYLVANIA OH 43560		CITY-ST-ZIP						
TITLE	TD	☐ Delete	TITLE			Change	Addition		
NAME STREET ADDRESS	KANE, LOIS		NAME						
STREET ADDRESS CITY-ST-ZIP	2115 STERLING GLEN CT SUN CITY FL 33573		STREET ADDRESS CITY-ST-ZIP						
TITLE	D	☐ Delete	TITLE	<u>ה</u>		Change	Addition		
NAME	PETERSON, GARY		NAME	John Ohd,	7 = 5	· a			
STREET ADDRESS CITY-ST-ZIP	5404 BUCHANAN DRIVE   FORT PIERCE FL 34982		STREET ADDRESS CITY-ST-ZIP		DOR SHORES DRIV	E			
TITLE	PD	□ Delete	TITLE	Sand Sant A	OHIO 45885 and Deeper Many	Change	Addition		
NAME	BRICKLEY, JAMES A	□ Délété	NAME	Property Comments	in the street of the state of t	CT CHANGE			
STREET ADDRESS	1035 SEASIDE DRIVE		STREET ADDRESS						
CITY-ST-ZIP	SARASOTA FL 34242		CITY-ST-ZIP	7					
TITLE NAME		☐ Delete	TITLE NAME	D FAMURIST	مسيد. أيا أما سائة	Change Change	Addition		
STREET ADDRESS			STREET ADDRESS	THE MODES,					
CITY-ST-ZIP			CITY-ST-ZIP	GREAT BENT	LEW, ESSEX, ENE	1LALD	COTRPG		

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: