2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State
02-10-2002 90048 023 ****61.25

DOCUMENT # 704023

1. Entity Name

SOUTH MANASOTA KEY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
77 SUNRISE DRIVE ENGLEWOOD FL 34223 US	77 SUNRISE DRIVE ENGLEWOOD FL 34223 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2840 A. No. Beach Road	2840 A No. Beach Rd.
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: Englewood FL	City & State: Englewood, FL
Zip: 34223 Country: US	Zip: 34223 Country: US

4. FEI Number 65-0122140 ☐ 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
MCLAUGHLIN, JOHN S. 77 SUNRISE DRIVE ENGLEWOOD FL 34223	Name: Judy A. Hoffstatter Street Address (P.O. Box Number is Not Acceptable): 2840A North Beach Road City: Englewood FL Zip Code: 34223

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: Judy A. Hoffstatter
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 Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HAMBLETON, FRANK 155 SAND DOLLAR LANE ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DASHER, BARRY 3075 BAY OAKS CIR ENGLEWOOD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCLAUGLIN, BEVERLY 77 SUNRISE DRIVE ENGLEWOOD FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HOFFSTATTER, JUDY A. 2840 A NO. BEACH ROAD ENGLEWOOD, FL 34223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MCLAUGHLIN, JOHN S. 77 SUNRISE DRIVE ENGLEWOOD FL 34223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JUDY A. HOFFSTATTER 2840 A NORTH BEACH ROAD ENGLEWOOD FL 34223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PARKER, STANLEY 2418 N. BEACH RD ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GALBERRITH, B J 185 MOCKINGBIRD LANE ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GALBERAITH, B.J. 185 MOCKINGBIRD LANE ENGLEWOOD FL 34223	☒ Change ☐ Addition

CR2E037 (9/01)

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: Judy A. Hoffstatter — Judy A. Hoffstatter — 1/20/02 — 941-474-2434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Treasurer — Date — Daytime Phone #