

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726244

1. Entity Name

SUNSET GROVE CONDOMINIUM ASSOCIATION, INC. ✓

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90079 023 *****61.25

A0045028

Principal Place of Business Mailing Address
2180 WEST SR 434 2180 WEST SR 434
SUITE 5000 SUITE 5000
LONGWOOD, FL 32779-5044 LONGWOOD, FL 32779-5044

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1890454

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

HART, JAMES W. JR
SENTRY MANAGEMENT, INC.
2180 W SR 434 STE 5000
LONGWOOD, FL 32779-5044

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.

SIGNATURE

Signature, typed or printed name of registered agent and if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/2/01

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 PD ☐ Delete
NAME Cogan, Linda
STREET ADDRESS 1881 N Hercules Ave, #1304
CITY-ST-ZIP Clearwater FL 33765

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME Chapman, Robert
STREET ADDRESS 2095 Sunset Point Rd, #2401
CITY-ST-ZIP Clearwater FL 33765

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME Waite, Betty
STREET ADDRESS 2055 Sunset Point Rd, #3804
CITY-ST-ZIP Clearwater FL 33765

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME Caldwell, George
STREET ADDRESS 2095 Sunset Point Rd, #1704
CITY-ST-ZIP Clearwater FL 33765

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME Martin, Anita
STREET ADDRESS 2095 Sunset Point Rd, #2004
CITY-ST-ZIP Clearwater FL 33765

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT CHAPMAN

Date

Daytime Phone #

2-28-01

CR2E037 (11/00)