

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90048 035 ****61.25

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DOCUMENT # 734620

1. Entity Name

WILDEWOOD SPRINGS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

**390 SPRINGDALE DR.
BRADENTON FL 34210**

Mailing Address

**390 SPRINGDALE DR.
BRADENTON FL 34210**

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

59-1681934

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

**MCCLLENATHEN, CHAD M P.A.
2033 MAIN ST.
STE 400
SARASOTA FL 34237**

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 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		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
P CALVERT, ALTON N 731 OAKVIEW DR. BRADENTON FL 34210	☐ Delete	Director	☒ Change ☐ Addition
S WILLIAMS, KATHRYN E 648 WOODLAWN DR. BRADENTON FL 34210	☒ Delete	Secretary Mary C. Kline 227 Sherwood Drive. Bradenton, FL 34210	☒ Change ☐ Addition
T RICE, PATRICK 465 PALM TREE DR. BRADENTON FL 34210	☐ Delete		☐ Change ☐ Addition
V KING, FRED J 138 PINEHURST DR. BRADENTON FL 34210	☐ Delete	Director	☒ Change ☐ Addition
D LAMIRANDE, DONALD 323 SPRINGDALE DR. BRADENTON FL 34210	☐ Delete	President	☒ Change ☐ Addition
D TAFURO, TONY 541 LAKESIDE DR. BRADENTON FL 34210	☐ Delete		☐ Change ☐ Addition

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:

Donald J. Lamirande
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01 (941) 758-2909

Date

Daytime Phone #

CR2E037 (10/00)