

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745534

1. Entity Name

CORDOVA GARDENS CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90155 026 ****61.25

Principal Place of Business

Mailing Address

CONDO KEEPERS
630 SOUTH ORANGE AVENUE, SUITE 101
SARASOTA FL 34236
US

CONDO KEEPERS
630 SOUTH ORANGE AVENUE, SUITE 101
SARASOTA FL 34236-7504
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2064066

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CONDO KEEPERS
630 SOUTH ORANGE AVENUE
SUITE 101
SARASOTA FL 34236

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
PTD
VROSS, JERRY
950 S. TAMiami TRAIL, #204
SARASOTA FL 34236 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DANGLER, PAUL
2208 BAHIA VISTA ST. #F4
SARASOTA FL 34239 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
SCANLAN, GUY
2216 BAHIA VISTA ST. H-7
SARASOTA FL 34239 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
MILLS, Judy
2204 Bahia Vista St
SARASOTA FL 34239 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CREATON, CAROLINE
2204 BAHIA VISTA ST. #D-8
SARASOTA FL 34239 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Solucioner Sarah
2204 Bahia Vista B1
SARASOTA FL ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ALBERICO, HENRY
2220 BAHIA VISTA ST., #G=5
SARASOTA FL 34239 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)