

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90062 047 ****61.25

DOCUMENT # 745534

1. Entity Name
CORDOVA GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**CONDO KEEPERS
630 SOUTH ORANGE AVENUE, SUITE 101
SARASOTA FL 34236
US**

Mailing Address
**2180 WEST SR 434
SUITE 5000
LONGWOOD FL 32779-5044**

11006353



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
4370 S. Tamiami Trail

Suite, Apt. #, etc.

Suite 156

City & State

Sarasota, FL

Zip

34231

Country

US

3. Mailing Address

4370 S. Tamiami Trail

Suite, Apt. #, etc.

Suite 156

City & State

Sarasota, FL

Zip

34231

Country

US

4. FEI Number **59-2064066**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name
Casey Condominium Management

Street Address (P.O. Box Number is Not Acceptable)

4370 S. Tamiami Trail Suite 156

City

Sarasota

FL

Zip Code

34231

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Pamala K. Casey**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/11/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

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

TITLE **PD** ☒ Delete
NAME **DONGLER, PAUL**
STREET ADDRESS **2208 BAHIA VISTA ST. F4**
CITY-ST-ZIP **SARASOTA FL 34239**

TITLE **D** ☐ Delete
NAME **SOLVERSON, SARAH**
STREET ADDRESS **2204 BAHIA VISTA B-1**
CITY-ST-ZIP **SARASOTA FL 34239**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME **DANGLER, PAUL**
STREET ADDRESS **2208 BAHIA VISTA ST #F4**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE **VPD** ☒ Change ☐ Addition
NAME **SOLVERSON, SARAH**
STREET ADDRESS **2204 BAHIA VISTA ST B1**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE **TD** ☐ Change ☒ Addition
NAME **REID, PARLANE**
STREET ADDRESS **2208 BAHIA VISTA ST. F3**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE **SD** ☐ Change ☒ Addition
NAME **MURRAY, SUZANNE**
STREET ADDRESS **2204 BAHIA VISTA DL**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE ☐ Change ☐ Addition
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:

PAUL DANGLER

4-10-03 941-957-4949

CR2E037 (10/02)