

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 25, 2001 8:00 am**
Secretary of State

04-11-2001 90005 001 ****61.25

DOCUMENT # 746314

1. Entity Name

BEECHWOOD ESTATES ASSOCIATION, INC.

Principal Place of Business

**ALICE HOSTETLER
330 MIMOSA CIR
SARASOTA FL 34232
US**

Mailing Address

**ALICE HOSTETLER
330 MIMOSA CIR
SARASOTA FL 34232
US**

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 **65-0164391**

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

Name

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

City

FL

Zip Code

**HOSTETLER, ALICE
330 MIMOSA CIR
SARASOTA FL 34232**

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	PD	☒ Delete
NAME	DUGGAN, JOE	
STREET ADDRESS	110 MIMOSA DR	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	Ernie Giordano, Pres.	☐ Change ☐ Addition
NAME	30 Mimosa Dr.	
STREET ADDRESS	Sarasota, Fl 34232	
CITY-ST-ZIP		

TITLE	VPD	☒ Delete
NAME	LUCE, DON	
STREET ADDRESS	75 MIMOSA DR	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	Jerry Daniel, V.Pres.	☐ Change ☐ Addition
NAME	105 Mimosa Dr.	
STREET ADDRESS	Sarasota, Fl. 34232	
CITY-ST-ZIP		

TITLE	SD	☒ Delete
NAME	BONACORSI, ED	
STREET ADDRESS	45 MIMOSA DR	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	Rhoda Solomon, Sec.	☐ Change ☐ Addition
NAME	100 Mimosa Dr.	
STREET ADDRESS	Sarasota, Fl. 34232	
CITY-ST-ZIP		

TITLE	TD	☐ Delete
NAME	HOSTETLER, ALICE	
STREET ADDRESS	330 MIMOSA CIRCLE	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	Remains same	☐ Change ☐ Addition
NAME	Treasurer	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Alice Hopkins	☐ Change ☒ Addition
NAME	80 Mimosa Dr.	
STREET ADDRESS	Sarasota, Fl. 34232	
CITY-ST-ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Erich Lah	☐ Change ☒ Addition
NAME	185 Mimosa Cr. Sarasota, Fl.	
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

Date

Daytime Phone #

CR2E037 (10/00)