2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State
04-13-2001 90018 017 ****61.25

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DOCUMENT # N07099

1. Entity Name

OLD ENGLEWOOD VILLAGE ASSOCIATION, INC.

527884

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
MCCARTHY, CANDY 452 W DEARBORN ENGLEWOOD FL 34223 US	411 W DEARBORN SUITE 168 ENGLEWOOD FL 34295-1207 US

2. Principal Place of Business	3. Mailing Address
447 W. DEARBORN ST	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ENGLEWOOD, FL	City & State
Zip: 34223 Country: USA	Zip Country

4. FEI Number 59-2519334 ☐ 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
MCCARTHY, CANDY 452 W DEARBORN ST ENGLEWOOD FL 34223	Name: SHIRLEY PLATT Street Address (P.O. Box Number is Not Acceptable): 447 W. DEARBORN ST City: ENGLEWOOD FL Zip Code: 34223

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: SHIRLEY PLATT Shirley Platt 4/9/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's 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	T MCCARTHY, CANDY 452 W DEARBORN ST ENGLEWOOD FL 34223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHIRLEY PLATT 447 W. DEARBORN ST ENGLEWOOD, FL 34223	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YUST, LISA 444 W. DEARBORN ST. ENGLEWOOD FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOB MACINTOSH 30 OLD ENGLEWOOD RD. ENGLEWOOD, FL 34223	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MEALS, TAYLOR 13 BUCHANS LANDING ENGLEWOOD FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ANELING, JOE 300 W. DEARBORN ST. ENGLEWOOD FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP STEVE LEE 441 W. DEARBORN ST ENGLEWOOD FL 34223	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAISCIGLIA, UITO 11 JAMESTOWN AVE ENGLEWOOD FL 34223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOB MOORE 145 W. DEARBORN ST. ENGLEWOOD, FL 34223	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PLATT, DON 9205 S RUILE RD ENGLEWOOD FL 34223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CAROL SWAYZE 30 ~~OLD~~ N. ELM ST ENGLEWOOD, FL 34223	☒ Change ☐ Addition

CR2E037 (10/00)

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: Shirley Platt SHIRLEY PLATT 4/9/01 941-473-0935
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #