

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N17563**

1. Entity Name

**SUN CITY CENTER COMMUNITY ASSOCIATION, INC.**

**FILED**  
**Mar 31, 2000 8:00 am**  
**Secretary of State**

03-31-2000 90044 007 \*\*\*\*61.25

Principal Place of Business      Mailing Address  
**1009 N. PEBBLE BEACH BLVD.**      **1009 N. PEBBLE BEACH BLVD.**  
**SUN CITY CENTER FL 33573**      **SUN CITY CENTER FL 33573-5352**  
**US**      **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      Applied For  
**59-2746620**      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**

**STERLING MGMT & FIN INC**  
~~1301 SEMINOLE BLVD STE 172~~ **2880 Scherer Dr, Suite 840**  
~~LARGO FL 34640~~ **ST. PETERSBURG, FL 33716**

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 \_\_\_\_\_ (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	<b>PD</b>	<input type="checkbox"/> Delete
NAME	<b>MILTON, JERRY</b>	
STREET ADDRESS	<b>2301 DEL WEBB BLVD E.</b>	
CITY-ST-ZIP	<b>SUN CITY CENTER FL</b>	
TITLE	<b>VP</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>TOVEY, MARY JANE</b>	
STREET ADDRESS	<b>1527 CHEVY CHASE DR</b>	
CITY-ST-ZIP	<b>SUN CITY CENTER FL</b>	
TITLE	<b>SD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>FRAZIER, DONNA</b>	
STREET ADDRESS	<b>1708 COCO PLAM CIRCLE</b>	
CITY-ST-ZIP	<b>SUN CITY CENTER FL</b>	
TITLE	<b>TD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WALKER, PETER H</b>	
STREET ADDRESS	<b>1844 WOLF LAUREL DR</b>	
CITY-ST-ZIP	<b>SUN CITY CENTER FL</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>VP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Cawein, Walter G.</b>	
STREET ADDRESS	<b>736 Winterbrooke Way</b>	
CITY-ST-ZIP	<b>Sun City Center, FL</b>	
TITLE	<b>SD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Wheat, Paul A.</b>	
STREET ADDRESS	<b>2211 Westminster Manor Lane, SCC</b>	
CITY-ST-ZIP	<b>Sun City Center, FL</b>	
TITLE	<b>TD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Escher, C. W.</b>	
STREET ADDRESS	<b>632 Ft. Duquesna Drive, SCC</b>	
CITY-ST-ZIP	<b>Sun City Center, FL</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Jerry Milton, PRES.  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 17 2000      813 633-3500  
 Date      Daytime Phone #