

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90115 050 ****70.00

DOCUMENT # N31379

1. Entity Name

LAUREL OAK COMMUNITY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2875 DICK WILSON DRIVE
 SARASOTA FL 34240
 US

2875 DICK WILSON DRIVE
 SARASOTA FL 34241-6161
 US

2. Principal Place of Business

3. Mailing Address

7751 BEE RIDGE RD.
 Suite, Apt. #, etc.

7751 BEE RIDGE RD.
 Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34241

Country

US

Zip

34241

Country

US

4. FEI Number

65-0162838

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

DART, JOHN M
1549 RINGLING BLVD.
SUITE 600
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 **VD** ☐ Delete
 NAME **DAVIES, ROBERT**
 STREET ADDRESS **3249 WALTER TRAVIS**
 CITY-ST-ZIP **SARASOTA FL**

TITLE **PD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** ☐ Delete
 NAME **UNGER, JAMES**
 STREET ADDRESS **2811 DICK WILSON**
 CITY-ST-ZIP **SARASOTA FL**

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

TITLE **TD** ☐ Delete
 NAME **WITTMER, STEVE**
 STREET ADDRESS **2936 DICK WILSON**
 CITY-ST-ZIP **SARASOTA FL**

TITLE **VD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** ☒ Delete
 NAME **OHARA, JAMES**
 STREET ADDRESS **7859 CHICK EVANS PLACE**
 CITY-ST-ZIP **SARASOTA FL**

TITLE **VD** ☐ Change ☒ Addition
 NAME **BARBARA CORBETT**
 STREET ADDRESS **2662 DICK WILSON DR.**
 CITY-ST-ZIP **SARASOTA, FL 34240**

TITLE **VD** ☒ Delete
 NAME **RENALDO, JAMES**
 STREET ADDRESS **3178 DICK WILSON DR**
 CITY-ST-ZIP **SARASOTA FL**

TITLE **TD** ☐ Change ☒ Addition
 NAME **PETER BILAN**
 STREET ADDRESS **7458 ALBERT TILLINGHAST DR.**
 CITY-ST-ZIP **SARASOTA, FL 34240**

TITLE ☐ Delete
 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:

JAMES UNGER SECRETARY OF LOCA 3/23/00 941 377-2974
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #