2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State
05-23-2002 90118 017 ****61.25

DOCUMENT # **N44761**

1. Entity Name

NANTUCKET I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
STERLING MANAGEMENT. INC. 723 IMAR DRIVE SUN CITY CENTER FL 33573	STERLING MANAGEMENT. INC. 723 IMAR DRIVE SUN CITY CENTER FL 33573

DO NOT WRITE IN THIS SPACE

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 59-3124224 ☐ 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
MAY, BRIAN L STERLING MANAGEMENT 723 IMAR DRIVE SUN CITY CENTER FL 33573	Name BECKER & POLIAKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) 2401 WEST BAY DRIVE, SUITE 414 City LARGO **FL** Zip Code 33770

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 Ellen Hirsch de Haan
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
ELLEN HIRSCH de HAAN, J.D. FOR THE FIRM

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	TITLE	VPD	☐ Change ☒ Addition
NAME	ROBINSON, JOHN JACK		NAME	Schwartz, Stuart	
STREET ADDRESS	2458 NANTUCKET HARBOR LOOP		STREET ADDRESS	2410 Nantucket Glen Pl.	
CITY-ST-ZIP	SUN CITY CENTER FL		CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE	TD	☒ Delete	TITLE	TD	☐ Change ☒ Addition
NAME	PRICKEN, FRED		NAME	Brocato, Mickie	
STREET ADDRESS	2401 NANTUCKET FIELD WAY		STREET ADDRESS	2425 Nantucket Harbor Lp.	
CITY-ST-ZIP	SUN CITY CENTER FL		CITY-ST-ZIP	Sun City Center, FL 33573	
TITLE	SD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	LONG, JULIA		NAME		
STREET ADDRESS	2830 NANTUCKET HARBOR LOOP		STREET ADDRESS		
CITY-ST-ZIP	SUN CITY CENTER FL 33573		CITY-ST-ZIP		
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MCKENNA, CHARLES		NAME		
STREET ADDRESS	2409 NANTUCKET FIELD WAY		STREET ADDRESS		
CITY-ST-ZIP	SUN CITY CENTER FL 33573		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	KEANE, PAT		NAME		
STREET ADDRESS	2434 NANTUCKET HARBOR LOOP		STREET ADDRESS		
CITY-ST-ZIP	SUN CITY CENTER FL 33573		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FULTZ, GEORGE		NAME		
STREET ADDRESS	2417 NANTUCKET HARBOR LOOP		STREET ADDRESS		
CITY-ST-ZIP	SUN CITY CENTER FL 33573		CITY-ST-ZIP		

CR2E037 (9/01)

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: [illegible signature] 4-3-02 President (813) 634-7026
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #