

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45489

1. Entity Name

GREYSTONE OWNERS' ASSOCIATION, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90169 009 ****61.25

Principal Place of Business

Mailing Address

1096 GREYSTONE LANE
SARASOTA FL 34232
US

1096 GREYSTONE LANE
SARASOTA FL 34232-2100
US

2. Principal Place of Business

3. Mailing Address

1010 Greystone Lane

1010 Greystone Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

65-0316938

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WITTING, SHIRLEY
1096 GREYSTONE LANE
SARASOTA FL 34232

Name

Louise A. Morgan

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

1010 Greystone Lane

City

Sarasota, FL

FL

Zip Code

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

Louise A. Morgan

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

2.22.00

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 **P** ☐ Delete
NAME **PONZO, MICHAEL**
STREET ADDRESS **1013 GREYSTONE LANE**
CITY-ST-ZIP **SARASOTA FL**

TITLE **P** ☒ Change ☐ Addition
NAME **Shirley Wittine**
STREET ADDRESS **1096 Greystone Ln**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE **DT** ☐ Delete
NAME **WITTING, SHIRLEY**
STREET ADDRESS **1096 GREYSTONE LN**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **DT** ☒ Change ☐ Addition
NAME **Morgan, Louise**
STREET ADDRESS **1010 Greystone Ln**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE **S** ☐ Delete
NAME **NYGREN, CAROLYN**
STREET ADDRESS **1049 GREYSTONE LN**
CITY-ST-ZIP **SARASOTA FL 34232**

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

TITLE **D** ☐ Delete
NAME **MORGAN, LOUISE**
STREET ADDRESS **1010 GREYSTONE LANE**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☐ Change ☒ Addition
NAME **Baldini, Wendy**
STREET ADDRESS **1063 Greystone Ln.**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE **D** ☐ Delete
NAME **CROSS, AUBREY**
STREET ADDRESS **1075 GREYSTONE LN**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☐ Change ☒ Addition
NAME **Vyhnaelek, Jeff**
STREET ADDRESS **1046 Greystone Ln.**
CITY-ST-ZIP **Sarasota, FL 34232**

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:

SIGNATURE: Louise A. Morgan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(941)
2.22.00 741-3131 ext 211
Date Daytime Phone #

CR2E037 (9/99)