


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90303 024 \*\*\*\*61.25

**DOCUMENT # N94000001977**

1. Entity Name  
**COUNTRY WALK OF SARASOTA ASSOCIATION, INC.**



Principal Place of Business  
**5692 COUNTRY WALK LANE  
SARASOTA FL 34233  
US**

Mailing Address  
**5692 COUNTRY WALK LANE  
SARASOTA FL 34233  
US**



2. Principal Place of Business  
**5627 COUNTRY WALK LANE**

3. Mailing Address  
**5627 COUNTRY WALK LANE**

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State  
**SARASOTA, FL**

City & State  
**SARASOTA, FL**

4. FEI Number **65-0555436**

Applied For  
 Not Applicable

Zip **34233** Country **US**

Zip **34233** Country **US**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MCCURDY, JEFFREY  
5627 COUNTRY WALK LANE  
SARASOTA FL 34233**

7. Name and Address of New Registered Agent

Name **David Mann**

Street Address (P.O. Box Number is Not Acceptable)  
**5627 COUNTRY WALK LANE**

City **SARASOTA** FL Zip Code **34233**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **DAVID MANN** DATE **3/26/2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**


10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD CLARK, JAMES L 5692 COUNTRY WALK LA SARASOTA FL 34233</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD MCCURDY, JEFFREY R 5627 COUNTRY WALK LANE SARASOTA FL 34233</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD MCCURDY, JEFFREY R 5627 COUNTRY WALK LANE SARASOTA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD CLARK, TAMMY 5692 COUNTRY WALK LANE SARASOTA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MURCH, JAMES 5621 COUNTRY WALK LA SARASOTA FL 34233</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D PROCE, SUZANNE 5669 COUNTRY WALK LA SARASOTA FL 34233</b>	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD Theresa Connor 5696 COUNTRY WALK LA SARASOTA, FL 34233</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VADT DAVID MANN 5627 COUNTRY WALK LANE SARASOTA, FL 34233</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SIC/D Dane Durviz 5662 COUNTRY WALK LANE SARASOTA, FL 34233</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Richard Cyphers 5699 COUNTRY WALK LANE SARASOTA, FL 34233</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **3-26-2003 727-553-1192**

CR2E037 (10/02)