

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90050 020 ****61.25

DOCUMENT # N94000003946

1. Entity Name

PINEHURST VILLAGE SECTION TWO CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**748 S. TAMiami TR
 OSPREY FL 34229**

**P.O. BOX 914
 OSPREY FL 34229**

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

65-0516374

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

**MANASOTA MANAGEMENT SERVICES, INC
 748 S. TAMiami TR
 OSPREY FL 34229**

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 NAME STREET ADDRESS CITY-ST-ZIP	DP CONIGLIO, SAMUEL III 7638 301 BLVD SARASOTA FL 34243	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISAAC, HERTHA 7234 ELEANOR CIRCLE #203 SARASOTA FL 34243	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST CONIGLIO, CAROL 7638 301 BLVD SARASOTA FL 34243	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Richard WACHENHEIM 7266 Eleanor Circle #201 Sarasota, FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir JENNIFER BREWER 7254 Eleanor Circle Sarasota FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secy LISA HUGOWSKI 7234 Eleanor Circle #202 Sarasota, FL 34243	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREAS QUEANA MAHER P.O. Box 1418 Talleveest FL 34270	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir ROBERT KANTROWITZ 7254 Eleanor Circle #203 Sarasota FL 34243	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-20-02 94-918-8483

CR2E037 (9/01)