

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

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90106 033 ****61.25

DOCUMENT # N94000003946

1. Entity Name

PINEHURST VILLAGE SECTION TWO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

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

Mailing Address

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WACHENHEIM, RICHARD 7266 ELEANOR CIRCLE #201 SARASOTA FL 34243	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREWER, JENNIFER 7254 ELEANOR CIRCLE SARASOTA FL 34243	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LUGOWSKI, LISA 7234 ELEANOR CIRCLE #202 SARASOTA FL 34243	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MAHER, OCEANA PO BOX 1418 TALLEVEST FL 34270	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KANTROWITZ, RUBERT 7254 ELEANOR CIRCLE #203 SARASOTA FL 34243	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director - President JAMES PETERS 7274 ELEANOR CIRCLE SARASOTA, FL 34237	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. JENNIFER BREWER 7254 ELEANOR CIRCLE SARASOTA, FL 34243	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY OCEANA MAHER PO BOX 1418 TALLEVEST FL 34270	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER Richard Wachenheim 7266 ELEANOR CIRCLE #201 SARASOTA, FL 34243	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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: **X** **SIGNATURE REQUIRED A. Peters**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/03

358-6857

CR2E037 (10/02)