

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90163 035 ****61.40

DOCUMENT # N98000001335

1. Entity Name

THE HAMPTONS OF SARASOTA COMMUNITY ASSOCIATION,

Principal Place of Business

Mailing Address

571 INTERSTATE BOULEVARD
 SARASOTA FL 34240
 US

C/O ARGUS MANAGEMENT, INC.
 1200 SIESTA BAYSIDE DRIVE
 SARASOTA FL 34242-8700
 US

2. Principal Place of Business

438 INTERSTATE COURT

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

4. FEI Number

59-0711505

Applied For

Not Applicable

Zip

34240

Country

USA

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

WATSKY, MORRIS J
700 N.W. 107 AVENUE
MIAMI FL 33172

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 **VD** Delete
 NAME **RUBY, DENNIS C**
 STREET ADDRESS **571 INTERSTATE BOULEVARD**
 CITY-ST-ZIP **SARASOTA FL 34240**

TITLE **PD** Change Addition
 NAME **LARRY PEEBLES**
 STREET ADDRESS **438 INTERSTATE COURT**
 CITY-ST-ZIP **SARASOTA, FL 34240**

TITLE **PD** Delete
 NAME **GLANTZ, ROBERT**
 STREET ADDRESS **571 INTERSTATE BOULEVARD**
 CITY-ST-ZIP **SARASOTA FL 34240**

TITLE **VD** Change Addition
 NAME **THOMAS HERMAN**
 STREET ADDRESS **438 INTERSTATE COURT**
 CITY-ST-ZIP **SARASOTA, FL 34240**

TITLE **STD** Delete
 NAME **RUSSO, PATTY**
 STREET ADDRESS **571 INTERSTATE BOULEVARD**
 CITY-ST-ZIP **SARASOTA FL 34240**

TITLE **STD** Change Addition
 NAME **ANDREA DANIELE**
 STREET ADDRESS **438 INTERSTATE COURT**
 CITY-ST-ZIP **SARASOTA, FL 34240**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDREA DANIELE

4/5/00

Date

(941) 377-7794

Daytime Phone #

CR2E037 (9/99)