

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702204

1. Entity Name

CRESCENT TOWERS ASSOCIATION, INC.

Principal Place of Business

1035 SEASIDE DRIVE  
SARASOTA FL 34242

Mailing Address

1035 SEASIDE DRIVE  
SARASOTA FL 34242

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

56-1003781

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

BRICKLEY, JAMES A  
1035 SEASIDE DR  
SARASOTA FL 34242

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 VPD  
NAME PEDRO, SHIRLEY  
STREET ADDRESS BOX 2286 RR#2  
CITY-ST-ZIP DUSHORE PA 18614

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD  
NAME SCHAFSTALL, MARILYN  
STREET ADDRESS 5851 BRAINARD DRIVE  
CITY-ST-ZIP SYLVANIA OH 43580

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD  
NAME KANE, LOIS  
STREET ADDRESS 2115 STERLING GLEN CT  
CITY-ST-ZIP SUN CITY FL 33573

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME CADIGES, JOHN  
STREET ADDRESS 86 SOUTHMOOR SHORES DR  
CITY-ST-ZIP SAINT MARYS OH 45885

☐ Delete

TITLE RENTAL REPRESENTATIVE  
NAME OLDIGES, JOHN  
STREET ADDRESS  
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE PSD  
NAME BRICKLEY, JAMES A  
STREET ADDRESS 1035 SEASIDE DRIVE  
CITY-ST-ZIP SARASOTA FL 34242

☐ Delete

TITLE PRESIDENT & SECRETARY  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE D  
NAME STUART, FRANK  
STREET ADDRESS THE MOORS, THE GREEN  
CITY-ST-ZIP GREAT BENTLEY, ESSEX, ENGLAND CO-78PG

☐ Delete

TITLE  
NAME STRUTT, FRANK  
STREET ADDRESS 1035 SEASIDE DR  
CITY-ST-ZIP SARASOTA, FL 34242

☒ 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: *James A. Brickley* REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/02

941-344-2100

Date

Daytime Phone #

CR2E037 (9/01)