

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718524

1. Entity Name

SORRENTO VILLAS SECTION 4, ASSOCIATION, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90038 025 ****61.25

Principal Place of Business

Mailing Address

**444 BOTTICELLI PL
 NOKOMIS FL 34275
 US**

**444 BOTTICELLI PL
 NOKOMIS FL 34275-1306
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1912526

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARKLE, DORA M.
 444 BOTTICELLI PL
 NOKOMIS FL 34275**

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

Dora Markle

DORA MARKLE

02/02/00

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 Delete
 NAME **P KOVAC, LAURA**
 STREET ADDRESS **402 OXFORD**
 CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE Change Addition
 NAME *See Attached Sheet*
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **V VERNET, MARGOT**
 STREET ADDRESS **435 BOTTICELLI**
 CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D HOFFMAN, JOANN**
 STREET ADDRESS **425 VERONESE DR**
 CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D EAGER, CHARLES**
 STREET ADDRESS **422 CORBET**
 CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D HIRTER, DAWN**
 STREET ADDRESS **409 OXFORD**
 CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D MARINACCIO, CLAIRE**
 STREET ADDRESS **429 BOTTICELLI DR.**
 CITY-ST-ZIP **NOKOMIS FL 34275**

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:

ROY MARKLE **ROY MARKLE**

2/2/00

941-966-5241

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
D/F 718524
D0017976

2000 UNIFORM BUSINESS REPORT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

BLOCK 11

TITLE P
NAME Markle, LeRoy
ST. Address 444 Botticelli Pl
City-ST-ZIP Nokomis, FL 34275-1306

TITLE V
NAME Marinaccio, Claire
ST. Address 429 Botticelli Dr.
City-ST-Zip Nokomis, FL 34275

TITLE D
NAME Kovac, Laura
ST. Address 402 Oxford Dr
CITY-ST-ZIP Nokomis, FL 34275

TITLE D
NAME Vernet, Margot
ST. ADDRESS 435 Botticelli DR
CITY-ST-ZIP Nokomis, FL 34275

TITLE D
NAME Hoffman, Joann
ST. ADDRESS 425 Veronese DR
CITY-ST-ZIP Nokomis, FL 34275

TITLE D
NAME Eager, Charles
ST. ADDRESS 422 Courbet Dr
CITY-ST-ZIP Nokomis, FL 34275

TITLE D
NAME Hirter, Dawn
ST ADDRESS 409 Oxford Dr
CITY-ST-ZIP Nokomis, FL 34275

This is the CORRECT LISTING - hope one of us can get it correct.