2002 UNIFORM BUSINESS REPORT (UBR) FILED Jan 16, 2002 8:00 am DOCUMENT # **719008** Secretary of State 1. Entity Name 01-16-2002 90034 001 ****61.25 SANDY HOOK ASSOCIATION, INC. Principal Place of Business Mailing Address 172 SANDY HOOK ROAD 172 SANDY HOOK ROAD SARASOTA FL 34242 SARASOTA FL 32242 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2087220 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ... Street Address (P.O. Box Number is Not Acceptable) BURGUNDER, BILL 172 SANDY HOOK ROAD SARASOTA FL 34242 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. 2/8/02 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11, FRIGNOCA, RICK Chang 148 SANDY HOOK RD SARASOTA, FL. 34242 TITLE TITLE ☐ Delete NAME NAME WEISS, BERNCIE MRS. STREET ADDRESS STREET ADDRESS 126 SANDY HOOK ROAD CITY-ST-ZIP CITY-ST-ZIP Sarasota Fl SD ☐ Change ☐ Addition TITLE ☐ Delete TITLE ROBER VOGEL NAME MILLER, BRITTON NAME 36 SANDY HOOK STREET ADDRESS STREET ADDRESS 6 SANDY HOOK RD CITY-ST-ZIF CITY-ST-ZIP SARASOTA FL 34242 TITLE - Delete -TITLE ☐ Change ☐ Addition NAME GARRO, DEBRA NAME STREET ADDRESS STREET ADDRESS 10 SANDY HOOK RD CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34242 Delete TITI F Change ☐ Addition BOND, DONALD NAME STREET ADDRESS STREET ADDRESS 44 ROCKWELL LANE CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34242 Delete TITI F Change Addition PULLMAN, NORMA NAME STREET ADDRESS STREET ADDRESS 125 SANDY HOOK RD CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34242

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.

CITY-ST-7IP

STREET ADDRESS

TITLE

NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

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BBBRUTTED DUITEF. BURGUNDER 1/8/02 941-349-9516
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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☐ Delete

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