

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720031

1. Entity Name

ROLLING GREEN GOLF VILLAGE ASSOCIATION, INC.

FILED

Mar 05, 2002 8:00 am  
Secretary of State

03-05-2002 90141 002 \*\*\*\*61.25

Principal Place of Business

Mailing Address

2591 GOLF COURSE DR.  
SARASOTA FL 34234

2591 GOLF COURSE DR.  
SARASOTA FL 34234

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

59-1619412

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

EDWARDS, RONALD  
2614 GOLF COURSE DRIVE  
SARASOTA FL 34234

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.

PRES. EDWARDS, RONALD

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-16-02

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 VD  
KINGETER, RUSTY  
STREET ADDRESS 2585 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA FL 34234

TITLE ☐ Change ☒ Addition  
NAME D  
DYER, COLIN  
STREET ADDRESS 2642 GOLF COURSE DR.  
CITY-ST-ZIP SARASOTA, FL 34234

TITLE ☐ Delete  
NAME D  
PETRAGNANI JR., ALBERT  
STREET ADDRESS 2576 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA FL 34234

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
DECKER, GEORGE D  
STREET ADDRESS 2748 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA FL 34234

TITLE ☒ Change ☐ Addition  
NAME VD  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME TD  
GUETHLEIN, ANNA MAE  
STREET ADDRESS 2437 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA FL 34234

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME D  
SMITH, AL  
STREET ADDRESS 2615 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA FL 34234

TITLE ☐ Change ☒ Addition  
NAME D  
WISHING, ZELINE  
STREET ADDRESS 2650 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA, FL 34234

TITLE ☐ Delete  
NAME SD  
ASTON, JAMES D  
STREET ADDRESS 2555 GOLF COURSE DR  
CITY-ST-ZIP SARASOTA FL 34234

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: TD. GUETHLEIN, ANNA MAE  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/16/02 941-355-7975

CR2E037 (9/01)