

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90123 025 ****61.25

DOCUMENT # 720031

1. Entity Name

ROLLING GREEN GOLF VILLAGE ASSOCIATION, INC.



Principal Place of Business

**2591 GOLF COURSE DR.
SARASOTA FL 34234**

Mailing Address

**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
2814 GOLF COURSE DRIVE
SARASOTA FL 34234~~

Name **George D. Decker PD**

Street Address (P.O. Box Number is Not Acceptable)

2748 Golf Course Dr.

City **Sarasota**

FL

Zip Code **34234**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *George D. Decker* **George D. Decker, Pres.**

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

(NOTE: Registered Agent signature required when reinstating)

3/4/03
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **DYER, COLIN**
STREET ADDRESS **2642 GOLF COURSE DR**
CITY-ST-ZIP **SARASOTA FL 34234**

TITLE **D** ☐ Change ☒ Addition
NAME **John Ebovicz**
STREET ADDRESS **2732 Golf Course Dr.**
CITY-ST-ZIP **Sarasota FL 34234**

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

TITLE **D** ☐ Change ☒ Addition
NAME **Dena DeFuria**
STREET ADDRESS **2610 Golf Course Dr.**
CITY-ST-ZIP **Sarasota FL 34234**

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

TITLE **D** ☐ Change ☒ Addition
NAME **Anne Marvin**
STREET ADDRESS **2723 Golf Course Dr.**
CITY-ST-ZIP **Sarasota FL 34234**

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

TITLE **T** ☐ Change ☒ Addition
NAME **Lee S. Wishind, Jr.**
STREET ADDRESS **2650 GOLF COURSE DR**
CITY-ST-ZIP **Sarasota FL 34234**

TITLE **VD** ☐ Delete
NAME **WISHING, ZELINE**
STREET ADDRESS **2650 GOLF COURSE DR**
CITY-ST-ZIP **SARASOTA FL 34234**

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

TITLE **SD** ☐ Delete
NAME **ASTON, JAMES O.**
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:

James O. Aston
SIGNATURE REQUIRED James O. Aston, Sect'y

**941-351-1122
941-358-0772**

CR2E037 (10/02)