

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 724238

1. Entity Name

WATERSIDE WOOD NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

612 LOTUS LANE
SARASOTA FL 34242
US

Mailing Address

612 LOTUS LANE
SARASOTA FL 34242
US

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

23-7298233

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

RACE, KAREN
612 LOTUS LANE
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 PD
NAME THOMAS, HAUSER ☒ Delete
STREET ADDRESS 601 LOTUS LANE
CITY-ST-ZIP SARASOTA FL 34242

TITLE P
NAME ~~THOMAS~~ O'NEIL, JACK ☐ Change ☒ Addition
STREET ADDRESS 4581, HIGEL AVENUE
CITY-ST-ZIP SARASOTA FL 34242

TITLE VS
NAME RACE, KAREN ☒ Delete
STREET ADDRESS 612 LOTUS LANE
CITY-ST-ZIP SARASOTA FL 34242

TITLE V
NAME MARTINELLI, FRANK ☒ Change ☐ Addition
STREET ADDRESS 4508 WOODSIDE ROAD
CITY-ST-ZIP SARASOTA FL 34242

TITLE TD
NAME REDELL, DORIS ☐ Delete
STREET ADDRESS 616 MANGROVE PTE RD
CITY-ST-ZIP SARASOTA FL 34242

TITLE S
NAME RACE, KAREN ☒ Change ☐ Addition
STREET ADDRESS 612, LOTUS LANE
CITY-ST-ZIP SARASOTA FL 34242

TITLE D
NAME NEIL, MOLLY ☐ Delete
STREET ADDRESS 4502 WOODSIDE RD
CITY-ST-ZIP SARASOTA FL 34242

TITLE D
NAME GOBBLE, RON ☐ Change ☒ Addition
STREET ADDRESS 4520 WOODSIDE ROAD
CITY-ST-ZIP SARASOTA FL 34242

TITLE D
NAME MARTINELLI, FRANK ☒ Delete
STREET ADDRESS 450B WOODSIDE ROAD
CITY-ST-ZIP SARASOTA FL 34242

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

TITLE D
NAME DAVIS, LOU ☐ Delete
STREET ADDRESS 620 MANGROVE POINT RD
CITY-ST-ZIP SARASOTA FL 34242

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: KAREN RACE REKAREND A. RACE

FEB. 24th 2002

941 349 7029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)