

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

**FILED**  
**Feb 17, 2003 8:00 am**  
**Secretary of State**

02-17-2003 90254 027 \*\*\*\*61.25

**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

**4581 HIGEL AVE**

3. Mailing Address

**4581 HIGEL AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**SARASOTA FL**

City & State

**SARASOTA FL**

4. FEI Number **23-7298233**

Applied For

Not Applicable

Zip

**34242**

Country

**USA**

Zip

**34242**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**RACE, KAREN  
612 LOTUS LANE  
SARASOTA FL 34242**

7. Name and Address of New Registered Agent

Name **JACK O'NEIL**  
Street Address (P.O. Box Number is Not Acceptable)  
**4581, HIGEL AVE**  
City **SARASOTA** FL Zip Code **34242**

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

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **O'NEIL, JACK**  
STREET ADDRESS **4581 HIGEL AVE**  
CITY-ST-ZIP **SARASOTA FL 34242**

TITLE **V** ☐ Delete  
NAME **MARTINELLI, FRANK**  
STREET ADDRESS **4508 WOODSIDE ROAD**  
CITY-ST-ZIP **SARASOTA FL 34242**

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

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

TITLE **S** ☐ Delete  
NAME **RACE, KAREN**  
STREET ADDRESS **612 LOTUS LANE**  
CITY-ST-ZIP **SARASOTA FL 34242**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition  
NAME **BAUMANN, ARACELI**  
STREET ADDRESS **4562, WOODSIDE ROAD**  
CITY-ST-ZIP **SARASOTA FL 34242**

TITLE **D** ☐ Change ☒ Addition  
NAME **DEVINE, EDWARD**  
STREET ADDRESS **4514, WOODSIDE ROAD**  
CITY-ST-ZIP **SARASOTA FL 34242**

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

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

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

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 A. RACE**

**FEB 13TH 2003 941 349 7029**

CR2E037 (10/02)