

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90166 001 ****61.25

DOCUMENT # 725706

1. Entity Name

MYAKKA VALLEY RANCHES IMPROVEMENT ASSOCIATION, I

Principal Place of Business

74-10A MYAKKA VALLEY TRAIL
PO BOX 21463
SARASOTA FL 34276-4463

Mailing Address

74-10A MYAKKA VALLEY TRAIL
PO BOX 21463
SARASOTA FL 34276-4463

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

59-1510999

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VOEGELIN, BARBARA
5670 HOWARD CREEK RD
SARASOTA FL 34241

7. Name and Address of New Registered Agent

Name

WALTER F. KAHNE

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

5548 OLD RANCH RD

City

SARASOTA, FL

FL

Zip Code

34241

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

Walter F. Kahne

WALTER F. KAHNE

4/24/01

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

TITLE **P** ☒ Delete
NAME **VOEGELIN, BARBARA**
STREET ADDRESS **5670 HOWARD CREEK RD**
CITY-ST-ZIP **SARASOTA FL 34141**

TITLE **V** ☐ Delete
NAME **FERRY, LINDA**
STREET ADDRESS **6683 OLD RANCH RD**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **S** ☒ Delete
NAME **LAWSON, LAURA**
STREET ADDRESS **6675 OLD RANCH RD**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **T** ☒ Delete
NAME **SCHAEFER, CHRISTINE**
STREET ADDRESS **6862 PAPAGO RD**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **D** ☐ Delete
NAME **WOLBERS, PAUL**
STREET ADDRESS **5550 MYAKKA VALLEY TR**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **D** ☒ Delete
NAME **DALTON, LEE**
STREET ADDRESS **5125 COMBEE LANE**
CITY-ST-ZIP **SARASOTA FL 34241**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **KAHNE WALTER F**
STREET ADDRESS **5548 OLD RANCH RD**
CITY-ST-ZIP **SARASOTA, FL 34241**

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

TITLE **S** ☒ Change ☐ Addition
NAME **HUTCHINSON, JERRY**
STREET ADDRESS **5441 MYAKKA VALLEY TRAIL**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **T** ☒ Change ☐ Addition
NAME **VOEGELIN, BARBARA**
STREET ADDRESS **5670 HOWARD CREEK RD**
CITY-ST-ZIP **SARASOTA, FL 34241**

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

TITLE **D** ☒ Change ☐ Addition
NAME **FILLMORE, BRUCE**
STREET ADDRESS **5139 COMBEE LANE**
CITY-ST-ZIP **SARASOTA, FL 34241**

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:

Walter F. Kahne **WALTER F. KAHNE**

Date

4/24/01

Daytime Phone #

941-923-3588

CR2E037 (10/00)