

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730923

1. Entity Name

LARCHMONT APARTMENTS, SECTION NO. 2, INC.

FILED

May 10, 2001 8:00 am
Secretary of State

05-10-2001 90114 030 ****61.25

Principal Place of Business

% MS. BARI FLETCHER
516 EL VERNONA AVE.
SARASOTA FL 34236

Mailing Address

% MS. BARI FLETCHER
516 EL VERNONA AVE.
SARASOTA FL 34236

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1804437

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WILHAM, ROBERT G P ESQ
240 N WASHINGTON BLVD
SUITE 305
SARASOTA FL 34236

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 FLETCHER, BARI
STREET ADDRESS 516 EL VERNONA AVE.
CITY-ST-ZIP SARASOTA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE VP
NAME PROSSER, ROBERT H
STREET ADDRESS 512 VERONONA AVE
CITY-ST-ZIP SARASOTA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE SD
NAME M LEE SHALLET
STREET ADDRESS 5333 KELLY DR
CITY-ST-ZIP SARASOTA FL 34233

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE TD
NAME GREG T MOROSHI
STREET ADDRESS 512 ELVERNOMA AVE
CITY-ST-ZIP SARASOTA FL 34236

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME WILSON, PEARL
STREET ADDRESS 508 EL VERNONA AVE.
CITY-ST-ZIP SARASOTA FL 34236

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bari G. Fletcher 11/4/21

Date

9577749

Daytime Phone #

CR2E037 (10/00)