

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 735002

1. Entity Name

DONAX VILLAGE CONDOMINIUM ASSOCIATION, INC.

FILED

Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90098 010 ****61.25

Principal Place of Business

Mailing Address

C/O ISLAND REALTY & MANAGEMENT
P.O. BOX 100
SANIBEL FL 33957
US

C/O ISLAND REALTY & MANAGEMENT
P.O. BOX 100
SANIBEL FL 33957
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

59-1659126

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PAPPAS, CAROL
C/O HERITAGE MANAGEMENT REALTY, INC
1200 PERIWINKLE WAY, SUITE 2
SANIBEL FL 33957

Name
Carol Pappas

Street Address (P.O. Box Number is Not Acceptable)
C/O Island Realty & Management

Po Box 100 - 703 Tarpon Bay Road

City
Sanibel

FL

Zip Code
33957

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
NAME
STREET ADDRESS
CITY-ST-ZIP
KD
KIRVEN, GERALD
3141 BROWNSBORO ROAD
LOUISVILLE KY 40206-1557 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
LIEBERMAN, HAROLD
730 Donax Street
Sanibel FL 33957 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HOGG, NORMAN
733 CARDIUM STREET
SANIBEL FL 33957 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JAEGGER, JUDITH
736 Donax Street
Sanibel FL 33957 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LENGACHER, ARTHUR
742 DONNEX ST
SANIBEL FL 33957 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HRABSKY, PAUL
747 Cardium Street
Sanibel FL 33957 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD VPD
LINSTROM, MARY
732 DONAX STREET
SANIBEL FL 33957 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MCENTIRE, JUDITH
748 Donax Street
Sanibel FL 33957 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD - PD
SCHARBERT, ROBERT
744 DONAX STREET
SANIBEL FL 33957 ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/21/02 941
395-2926

CR2E037 (9/01)