2000 UNIFORM BUSINESS REPORT (UBR)

Apr 19, 2000 8:00 am Secretary of State DOCUMENT # **742969** 04-19-2000 90035 025 ****61.25 BURGUNDY UNIT TWO ASSOCIATION, INC. Mailing Address__ Principal Place of Business 4505 3RD STREET CIRCLE W. #271 4505 3RD STREET CIRCLE W. #271 717326 **BRADENTON FL 34207** BRADENTON FL 34207-1509 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2115954 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent - - -6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) AAA BOOKKEEPING 4303 1 ST 200 City Zip Code **BRADENTON FL 34208** 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. П Спапае ☐ Addition TITLE PD ☐ Delete TITLE NAME SNYDER, FREDERICK W. NAME STREET ADDRESS 4512 3RD ST. CR., W,#318 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** ☐ Change **X** Addition **VPCE** Delete TITLE TITLE VPCE NAME CADLE, MARY R NAME Farakish, Mohammed STREET ADDRESS STREET ADDRESS 5760 BEE RIDGE RD EXIT 4512 Third St. Cir. W, Unit 519 Bradenton, FL 34207 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL X Delete TITLE ☐ Change **Addition** NAME STOVER, LEE NAME Skogen, Mark STREET ADDRESS STREET ADDRESS 4510 3 ST CR W, 511 3453 Fork Shoals Rd. Simpsonville, SC 29680 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** Addition DS ☐ Delete TITLE TITLE NAME BEADLE, MARJORIE NAME STREET ADDRESS STREET ADDRESS 4508 3RD ST. CIR. WEST #509 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34207** ☐ Change M Addition Delete TITLE TITLE FARAKISH, MOHAMMAD T NAME NAME Sementelli, Edward STREET ADDRESS 4512 3RD ST. CIR W UNIT 519 STREET ADDRESS 4510 Third St. Cir. W. Unit 511 CITY-ST-ZIP CITY-ST-ZIP **BRDENTON FL 34207** ${f Bradenton}_{m \cdot}$ Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 λ

Edina I A Smintelli

4-12-00

FILED