

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90003 033 ****61.25

DOCUMENT # 743538

1. Entity Name

VILLAGE ON THE GREEN CONDOMINIUM I ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~2014 DREW STREET~~
 CLEARWATER FL 33765

~~2014 DREW STREET~~
 C/O AMERITECH PROP. MGMT.
 CLEARWATER FL 33765

2. Principal Place of Business

3. Mailing Address

1799-B N. Belcher Rd.
 Suite, Apt. #, etc.

1799-B N. Belcher Road
 Suite, Apt. #, etc.

City & State

Clearwater, FL.

City & State

Clearwater, FL.

4. FEI Number

59-1898018

Applied For

Not Applicable

Zip

Country

33765

Pineellas USA

Zip

Country

33765

Pineellas USA

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

AMERI-TECH REALTY, INC.

~~2014 DREW STREET~~
 CLEARWATER FL 33765

Name

Ameri-Tech Realty INC
 Street Address (P.O. Box Number is Not Acceptable)

1799-B North Belcher Road

City

Clearwater

FL

Zip Code

33765

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

72 CTR Michael C. Perez President 2/15/02

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** ☒ Delete
 NAME **LAMBERTSON, FRANK**
 STREET ADDRESS **2530-A LAURELWOOD CIR.**
 CITY-ST-ZIP **CLEARWATER FL 33763**

TITLE **SD.** ☐ Change ☒ Addition
 NAME **PE Rouse**
 STREET ADDRESS **2596-B Laurel Wood Drive**
 CITY-ST-ZIP **Clearwater, FL 33763**

TITLE **VPD** ☐ Delete
 NAME **BRADNER, ROBERT**
 STREET ADDRESS **2498A LAURELWOOD DR.**
 CITY-ST-ZIP **CLEARWATER FL 33763**

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

TITLE **TD** ☐ Delete
 NAME **STADMAN, CHARLES**
 STREET ADDRESS **2526A LAURELWOOD DR**
 CITY-ST-ZIP **CLEARWATER FL 33763**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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:

PE Rouse
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/02 727-726-8000

Date

Daytime Phone #

CR2E037 (9/01)