

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90205 046 ****61.25

DOCUMENT # 743852

1. Entity Name

222 BEACH ROAD OWNERS ASSOCIATION, INC.



Principal Place of Business

**2198 PRINCETON ST
STE #20
SARASOTA FL 34237**

Mailing Address

**2198 PRINCETON ST
STE #20
SARASOTA FL 34237**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2054401**

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

**MA - CON INC
2198 PRINCETON ST STE #20
SARASOTA FL 34237**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FANKHAUSER, PHILIP 222 BEACH RD #4 SARASOTA FL 34242	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORNON, KATHLEEN 222 BEACH RD #7 SARASOTA FL 34242	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BLAISING, STEPHEN 222 BEACH RD #5 SARASOTA FL 34242	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LIROFF, RICHARD 222 BEACH RD #9 SARASOTA FL 34242	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRSNER, ALVIN 222 BEACH RD #1 SARASOTA FL 34242	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

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

PHILIP FANKHAUSER
9/15/03 (941) 366-8480

CR2E037 (10/02)