

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90103 005 ****61.25

DOCUMENT # 744088

1. Entity Name

BENEVA OAKS MAINTENANCE AND PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

P O BOX 19392
SARASOTA FL 34276-9392

Mailing Address

P O BOX 19392
SARASOTA FL 34276-9392

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

59-1969965

Applied For

Not Applicable

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

BLAKELAY, RICHARD D
3709 BENEVA OAK BLVD
SARASOTA FL 34238

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 re-registering)

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2006

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 **BLAKELEY, RICHARD D** ☐ Delete
STREET ADDRESS **3709 BENEVA OAKS WAY**
CITY-ST-ZIP **SARASOTA FL 34238**

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

TITLE ☒ Delete
NAME ~~JACOBS, SUSAN~~
STREET ADDRESS ~~3656 BENEVA OAKS BLVD~~
CITY-ST-ZIP ~~SARASOTA FL 34238~~

TITLE ☒ Change ☐ Addition
NAME **TERESA MARTIN**
STREET ADDRESS **3654 BENEVA OAKS DRIVE**
CITY-ST-ZIP **SARASOTA, FL. 34238**

TITLE ☐ Delete
NAME **HOSTETLER, MARK**
STREET ADDRESS **3703 BENEVA OAKS DRIVE**
CITY-ST-ZIP **SARASOTA FL 34238**

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

TITLE ☐ Delete
NAME **LORIN, JOHN**
STREET ADDRESS **3641 BENEVA OAKS BLVD.**
CITY-ST-ZIP **SARASOTA FL 34238**

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

TITLE ☒ Delete
NAME ~~LEVY, SUSAN~~
STREET ADDRESS ~~3778 BENEVA OAKS BLVD.~~
CITY-ST-ZIP ~~SARASOTA FL 34238~~

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 exemptions contained in Section 119, 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:

Mark Hostetler - Vice Pres.

02/17/06 941-954-4188