

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 744310

1. Entity Name

MORTON VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

5400 34TH STREET WEST
BRADENTON FL 34210

Mailing Address

5400 34TH STREET WEST
BRADENTON FL 34210

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1923361

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

S CONDOMINIUM MANAGEMENT
4301 32ND ST W
SUITE A19
BRADENTON FL 34205

7. Name and Address of New Registered Agent

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.

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

TITLE	PD	☐ Delete
NAME	STERN, HERBERT	
STREET ADDRESS	5400 34TH ST W #7K	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	VPD	☒ Delete
NAME	PIETROWITZ, ANTHONY	
STREET ADDRESS	5400 34TH STREET WEST 2H	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	SD	☒ Delete
NAME	JACOBSMEYER, PATRICIA J	
STREET ADDRESS	5400 34TH STREET WEST	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	TD	☒ Delete
NAME	ZAHRA, EDWARD	
STREET ADDRESS	5400 34TH STREET WEST 4L	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	D TREAS	☐ Delete
NAME	MCLEOD, CHARLES	
STREET ADDRESS	5400 34TH STREET WEST #D#17	
CITY-ST-ZIP	OXON HILL MD 20745	
TITLE	D	☒ Delete
NAME	SIEGEL, LOUIS	
STREET ADDRESS	5400 34TH ST W #12D	
CITY-ST-ZIP	BRADENTON FL 34210	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SEC	☐ Change ☒ Addition
NAME	JOAN MUNRO	
STREET ADDRESS	5400 34TH ST W 12F	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	D	☐ Change ☒ Addition
NAME	Logan, Ralph	
STREET ADDRESS	5400 34TH ST W #5G	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D VPD	☐ Change ☒ Addition
NAME	mahoney, Jim	
STREET ADDRESS	5400 34th St W 1C	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE		☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-758-9454

CR2E037 (10/00)