

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

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90509 047 ****61.25

DOCUMENT # 751290

1. Entity Name

SADDLEBROOK RESORT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**5700 SADDLEBROOK WAY
WESLEY CHAPEL FL 33543-1499**

Mailing Address

**5700 SADDLEBROOK WAY
WESLEY CHAPEL FL 33543-1499**

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 **59-2182217**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

10008654



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALLEN, DONALD
5700 SADDLEBROOK WAY
WESLEY CHAPEL FL 33543**

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	D, GEHRKE, SALLY 5407 BLUE HERON LN WESLEY CHAPEL FL 33543	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMPSEY, THOMAS L 5700 SADDLEBROOK WAY WESLEY CHAPEL FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ALLEN, DONALD L. 1314 FOXWOOD DR. LUTZ FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GULLETT, DWAIN 5325 COBBLESTONE CT WESLEY CHAPEL FL 33543	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOEHNING, DICK 5017 PINELAKE RD. WESLEY CHAPEL FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCMANAMON, THOMAS 1299 HARWICH COURT ROCKY RIVER OH 44116	☐ 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: **SIGNATURE REQUIRED**

1/21/03

313-907-8671

CR2E037 (10/02)