## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Feb 26, 2002 8:00 am **DOCUMENT # 759238 Secretary of State** 1. Entity Name GREENVIEW VILLAS CONDOMINIUM ASSOCIATION, INC. 02-26-2002 90128 011 \*\*\*\*61.25 Principal Place of Business Mailing Address 1025 CAPRI ISLES BLVD # 25 1025 CAPRI ISLES BLVD # 25 VENICE FL 34292 VENICE FL 34292 00031841 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2238330 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Barbara <u>Thoner</u> Street Address (P.O. Box Number is Not Acceptable) #2! KALMAN, PATRICIA 1023 CAPRI ISLES BLVD . , . Zip Code 3 4 2 2 Venice VENICE FL 34292 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE Delete TITLE Burton, James Blud del NAME MITCHELL, EDWARD STREET ADDRESS STREET ADDRESS 1025 CAPRI ISLES BLVD #11 venice It 34292 CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34292 TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition NAME FORD, BARBARA NAME STREET ADDRESS 1023 CAPRI ISLES BLVD #3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34292 VPD **VPD Change** ☐ Addition Delete TITLE TITLE George young 123 Peach Rd BURTON, JAMES NAME NAME STREET ADDRESS STREET ADDRESS 1021 CAPRI ISLES BLVD #11 Eversham NJ 08053-7028 CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34292 darry webster 1023, capri Isles Blue #6 X Delete Change Addition TITLE TITLE YOUNG, GEORGE NAME NAME STREET ADDRESS 123 PEACH ROAD STREET ADDRESS Venice #1 34292 CITY-ST-ZIP CITY-ST-7IP EVERSHAM NJ 08053-7028 **⊠** Delete **X**Addition TITLE TITLE Barbara thoner KALMAN, PATRICIA NAME NAME 1028 Copri Isles Blud #21 STREET ADDRESS STREET ADDRESS 1023 CAPRI ISLES BLVD #2 Venice H 34292 CITY-ST-ZIP CITY-ST-7IP VENICE FL 34292 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1) 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: BOYDONOTHORER & BURGO