# Page 1045

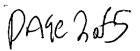
Daytime Phone #

## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

#### **DOCUMENT #764116** 04 APR 16 AM 11: 02 1. Entity Name SUTTON PLACE OF VENICE CONDOMINIUM ASSOCIATION, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address ART SEIDELMAN P.O. BOX 1205 1508 PELICAN COVE RD OSPREY, FL 34229 US SARASOTA, FL 34231 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 Cha-NP CR2E037 (10/03) 4. FE! Number 59-2657406 City & State City & State Applied For Not Applicable Zip Country Zip 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 Name SEIDELMAN, ARTHUR G Street Address (P.O. Box Number is Not Acceptable) 1508 PELICAN COVE RD GR 230 SARASOTA, FL 34231 Zip Code FL 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 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD ☐ Addition TITLE ☐ Defete TITLE DAVIS, JOHN NAME NAME **800033451648** 04/21/04--01060--026 \*\*61.25 STREET ADDRESS STREET ADDRESS 4 RIVER DRIVE ROAD CITY-ST-ZIP HACKETTSTOWN, NJ 07840 CITY-ST-7IP TITLE **VPSD** ☐ Delete TITLE ☐ Change ☐ Addition SENTILE, JOSEPH A NAME NAME STREET ADDRESS STREET ADDRESS 800 CHARIOT LANE CITY-ST-ZIP LIVERPOOL, NY 13090 CITY-ST-ZIP TITLE ☐ Change IIILE ☐ Delete ☐ Addition GRANATA, THOMAS NAME NAME 744 CADIZ ROAD UNIT 9 STREET ADDRESS STREET ADDRESS VENICE, FL 34285 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P 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.





### **Annual Report**

Page 1

**Document Number** 

#### 764116

**Business Entity Name** 

#### SUTTON PLACE OF VENICE CONDOMINIUM ASSOCIATION, INC.

FEI Number	592657406	
FEI Number Status	C Applied For C Not Applicable © Current	
Certificate of Status Desire	d C Yes  € No	
Principal Place of Business		
Address	ART SEIDELMAN	
Suite, Apt. #, etc.	1508 PELICAN COVE RD	
City, State	SARASOTA , FL	
Zip Code & Country	34231 US	
Ţ	Mailing Address	
Address	P.O. BOX 1205	
Suite, Apt. #, etc.		
City, State	OSPREY , FL	
Zip Code & Country	34229 US	
Name And A	ddwara of Danishawad Amant	
	ddress of Registered Agent	
Name (Last, First, Middle, Title)	SEIDELMAN , ARTHUR , G ,	
-or- RA Business Name		
Address	1508 PELICAN COVE RD	
Suite, Apt. #, etc.	GR 230	
City, State	SARASOTA , FL	
Zip Code & Country	34231 US	
Decistand Asset (DA) is a	hamand the name DA manak ki mak ki sin name	

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

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Registered Agent Signature Cuthun Sintellum

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#### **Annual Report**

Page 2

Document Number **764116** 

**Business Entity Name** 

#### SUTTON PLACE OF VENICE CONDOMINIUM ASSOCIATION, INC.

Election Campaign Financing Trust Fund Contribution © Yes 

No

#### Officer/Director Name And Address

Title	<u> PD</u>
Name (Last, First, Middle, Title)	DAVIS JOHN
-or- Entity Name	
Street Address	4 RIVER DRIVE ROAD
City, State	HACKETTSTOWN , NJ
Zip Code & Country	07840
Title	VPSD
Name (Last, First, Middle, Title)	DAVID SMITH G
-or- Entity Name	
Street Address	612 LOCH ALSH AVE.
City, State	AMBLER , PA
Zip Code & Country	19002
Title	T
Name (Last, First, Middle, Title)	GRANATA THOMAS
-or- Entity Name	
Street Address	744 CADIZ ROAD UNIT 9
City, State	VENICE , FL
Zip Code & Country	34285
Title	
Name (Last, First, Middle, Title)	
-or- Entity Name	

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Officer/Director Signal	ture pohn dayas
Title	PRES John Wavn
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	bove must type their name in the ture' block below. A corporate name
Officers/Directors	Officers/Directors to list
C List more than six	
Zip Code & Country	
City, State	
Street Address	
or- Entity Name	
Name (Last, First, Middle, Title)	, , , , , , , , , , , , , , , , , , , ,
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Zip Code & Country	
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Street Address	
or- Entity Name	
Name (Last, First, Middle, Title)	
Title Title	
Zip Code & Country	
City, State	

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