

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Page 1 of 5

FILED

04 APR 16 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # 764116

1. Entity Name
SUTTON PLACE OF VENICE CONDOMINIUM
ASSOCIATION, INC.

Principal Place of Business
ART SEIDELMAN
1508 PELICAN COVE RD
SARASOTA, FL 34231 US

Mailing Address
P.O. BOX 1205
OSPREY, FL 34229 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04202004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2657406

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEIDELMAN, ARTHUR G
1508 PELICAN COVE RD
GR 230
SARASOTA, FL 34231

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. 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

Filing Fee is \$61.25
Due by May 1, 2004

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

TITLE PD
NAME DAVIS, JOHN ☐ Delete
STREET ADDRESS 4 RIVER DRIVE ROAD
CITY-ST-ZIP HACKETTSTOWN, NJ 07840

TITLE VPSD
NAME SENTILE, JOSEPH A ☐ Delete
STREET ADDRESS 800 CHARIOT LANE
CITY-ST-ZIP LIVERPOOL, NY 13090

TITLE T
NAME GRANATA, THOMAS ☐ Delete
STREET ADDRESS 744 CADIZ ROAD UNIT 9
CITY-ST-ZIP VENICE, FL 34285

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800033451648
CITY-ST-ZIP 04/21/04--01060--026 **61.25

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

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

TITLE ☐ Change ☐ Addition
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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 #

**Division of Corporations****Annual Report**

Page 1

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Business Entity Name

SUTTON PLACE OF VENICE CONDOMINIUM ASSOCIATION, INC.

FEI Number

592657406

FEI Number Status

☐ Applied For ☐ Not Applicable ☒ CurrentCertificate of Status Desired ☐ 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****Mailing Address**

Address

P.O. BOX 1205

Suite, Apt. #, etc.

City, State

OSPREY**FL**

Zip Code & Country

34229**US****Name And Address 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**

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.

Registered Agent Signature

Sunbiz Home Page

Public Access Help

**Division of Corporations****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
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name

Division of Corporations

Page 5 of 5

Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

☐ List more than six
Officers/Directors

☒ No additional
Officers/Directors to list

An individual named above must type their name in the
'Officer/Director Signature' block below. A corporate name
is not allowed in this block.

Title PRES
Officer/Director Signature JOHN DAVIS

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[Public Access Help](#)