

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L90081

1. Entity Name

VENGROFF, WILLIAMS & ASSOCIATES, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90202 030 ***150.00

Principal Place of Business

Mailing Address

3808 N TAMiami TR
SARASOTA FL 34234

P O BOX 4155
SARASOTA FL 34230-4155
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **58-1963137**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VENGROFF, HARVEY
3501 BAYOU CIRCLE
LONGBOAT KEY FL 34228

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
VENGROFF, HARVEY
3501 BAYOU SOUND
LONGBOAT KEY FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
JOEL VENGROFF
1 BANKSIDE DR
CENTERPORT NY 11721 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MARK VENGROFF
28 PARK CREST DR.
NEWPORT COAST CA 92657 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
1 Cavalieri Drive
Newport Coast, CA 92646

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ROBERT WILLIAMS
69 BAY AVE
HALESITE NY 11743 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
CFO/D
2601 Bern Creek Loop
Sarasota, FL 34240

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
KAISTY VENGROFF
285 WOODBLUE BLVD.
NORTHPORT NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
S/D

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☒ Addition
P/D
Karen Cudney
1220 Mill Creek Road
Bradenton, FL 34202

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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 #

KAREN CUDNEY P/D 03-30-00 941 355 5900

CR2E034 (9/99)