

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2002 8:00 am**  
**Secretary of State**

0052596

**DOCUMENT # N00000003325**

1. Entity Name

**ASSOCIATION OF DOWNTOWN COMMERCIAL PROPERTY OWNERS, INC.**

03-29-2002 91415 039 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1819 MAIN STREET, STE. 610  
SARASOTA FL 34236

1819 MAIN STREET, STE. 610  
SARASOTA FL 34236

2. Principal Place of Business

3. Mailing Address

1575 Main Street

1575 Main St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Sarasota, FL

Sarasota FL

Zip

Country

Zip

Country

34236

USA

34236

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NORTON, SAM D  
1819 MAIN STREET, STE. 610  
SARASOTA FL 34236

Name

Mundy K. Parker

Street Address (P.O. Box Number is Not Acceptable)

46 Sarasota Commercial Mgmt

1937 Golf Street

City

Sarasota

FL

Zip Code

34236

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

*Mundy K. Parker*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/22/02

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  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME HARSHMAN, JOHN B  
STREET ADDRESS 1575 MAIN STREET  
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

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

TITLE VPD  
NAME FRANKLIN, BRUCE  
STREET ADDRESS 149 COCONUT AVENUE  
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

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

TITLE TD  
NAME LONG, STEVE  
STREET ADDRESS 1914 OAK STREET  
CITY-ST-ZIP SARASOTA FL 34236 ☒ Delete

TITLE T  
NAME Rosemary Moshier  
STREET ADDRESS 40 N. Orange Ave  
CITY-ST-ZIP Sarasota, FL 34236 ☐ Change ☒ Addition

TITLE SD  
NAME MARCUS, ANDREW  
STREET ADDRESS 1290 8<sup>th</sup> PALM AVENUE, SUITE 119  
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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:

*Andrew Marcus*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/02 941-951-2002  
Date Daytime Phone #

CR2E037 (9/01)