

FILED
Jul 28, 2002 8:00 am
Secretary of State

04-23-2002 90360 043 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000004514

1. Entity Name

HARLEY OWNERS GROUP OF SARASOTA, FLORIDA, INC.

Principal Place of Business

Mailing Address

330 CATTLEMEN RD.
 SARASOTA FL 34232

330 CATTLEMEN RD.
 SARASOTA FL 34232

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1157294

Applied For

Not Applicable

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

HOGREVE, BRADLEY W ESQ
 3700 S. TAMiami TRAIL, STE. 201
 SARASOTA FL 34239

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

After September 13, 2002,
 min. will be \$236.25.

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	Coo.						
	Terr. Antonelli D.	330 Cattlemen Rd.	Sarasota, FL 34232				
	Director						
	Peter Defant D.	415 - 65th St. E.	Bradenton, FL 34208				
	Sec.						
	Lorraine Sinclair D.	7310 Dunes Ct.	Bradenton, FL 34202				

CR2E037 (4/02)

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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-11-02

941-951-6103

Attachment
Document #
NO1000004514

39791

6640615687
04/29/02
BANK OF AMERICA NA JAX
40630000474 E1102 90 P11

2353 01145

APR 29 02

130065900ET
SUNTRUST ORL
44302002
4479-006
TOL

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT# 1000004514

ROSSITER'S HARLEY-DAVIDSON, INC.
PHONE (941) 951-6103
330 CATTLEMEN ROAD
SARASOTA, FL 34232

SUNTRUST BANK, GULF COAST
SARASOTA, FL 34230-2138
63-1084/831 321

46481

538057

46481

PAY
TO THE
ORDER OF

Sixty One Dollars and 25 Cents.

FL DEPARTMENT OF STATE

DATE
4/12/2002

AMOUNT
*****61.25


AUTHORIZED SIGNATURE

⑈046481⑈ ⑈063110843⑈0321008838046⑈

⑈0000006125⑈