

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90269 021 \*\*\*\*61.25

**DOCUMENT # N03000007480**

1. Entity Name  
**CAROLINA LANDINGS AT UNIVERSITY PLACE  
CONDOMINIUM A ASSOCIATION, INC.**



Principal Place of Business  
**C/O AMI  
9031 TOWN CENTER PKWY  
BRADENTON, FL 34202**

Mailing Address  
**C/O AMI  
9031 TOWN CENTER PKWY  
BRADENTON, FL 34202**

**50005656**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**20-0327048**

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

**ADVANCED MANAGEMENT, INC.  
9031 TOWN CENTER PKWY  
BRADENTON, FL 34202**

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, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☒ Delete  
NAME **ANGELUCCI, BARBARA**  
STREET ADDRESS **7536 PLANTATION CIRCLE**  
CITY-ST-ZIP **UNIVERSITY PARK, FL 34201**

TITLE **P** ☐ Change ☒ Addition  
NAME **Chuck Shah**  
STREET ADDRESS **6712 Spring Moss Place**  
CITY-ST-ZIP **Bradenton, FL 34202**

TITLE **DVP** ☒ Delete  
NAME **FISHER, LINDA**  
STREET ADDRESS **7596 PLANTATION CIRCLE**  
CITY-ST-ZIP **UNIVERSITY PARK, FL 34201**

TITLE **VP** ☐ Change ☒ Addition  
NAME **Mr. Joshua Worthy**  
STREET ADDRESS **7624 Plantation Circle**  
CITY-ST-ZIP **University Park, FL 34201**

TITLE **STD** ☒ Delete  
NAME **CIRILLO, DOMINIC**  
STREET ADDRESS **7560 PLANTATION CIRCLE**  
CITY-ST-ZIP **UNIVERSITY PARK, FL 34201**

TITLE **S** ☐ Change ☒ Addition  
NAME **Mrs. Sally Wavrick**  
STREET ADDRESS **7629 Plantation Circle**  
CITY-ST-ZIP **University Park, FL 34201**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **T** ☐ Change ☒ Addition  
NAME **MR Alan Fink**  
STREET ADDRESS **7698 Plantation Circle**  
CITY-ST-ZIP **UNIVERSITY PARK, FL 34201**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
NAME **Barbara Angelucci**  
STREET ADDRESS **7536 Plantation Circle**  
CITY-ST-ZIP **University Park, FL 34201**

TITLE **D** ☐ Delete  
NAME **Mr. Doug Saunier**  
STREET ADDRESS **5532 Lilly's Lane**  
CITY-ST-ZIP **Canton, OH 44718**

TITLE **D** ☐ Change ☒ Addition  
NAME **Edith Schreiber**  
STREET ADDRESS **7657 Plantation Circle**  
CITY-ST-ZIP **University Park, FL 34201**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 617, Florida Statutes; 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.

I further certify that the information

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Mar. 10, 2006 (941) 369-1134*