

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

03-27-2006 90268 009 \*\*\*\*61.25

**DOCUMENT # N03000007724**

1. Entity Name  
**CAROLINA LANDINGS AT UNIVERSITY PLACE  
CONDOMINIUM B 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**

**50005634**



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  
**20-0327014**

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 **PD** ☒ Delete  
NAME **REIBER, EDITH**  
STREET ADDRESS **CIRCLE**  
CITY-ST-ZIP **ARK, FL 34201**

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

TITLE ☒ Delete  
NAME **GORDON, WILLIAM**  
STREET ADDRESS **7023 CONGLEY PLACE**  
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 ☒ Delete  
NAME **DST**  
STREET ADDRESS **WORTHY, JOSHUA**  
CITY-ST-ZIP **7624 PLANTATION CIRCLE**  
**UNIVERSITY PARK, FL 34201**

TITLE **S** ☐ Change ☒ Addition  
NAME **Mrs. Sally Warrick**  
STREET ADDRESS **7624 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 119, 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 #

**3-10-06 (941) 359-1134**