

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04676

FILED  
Nov 08, 2005  
Secretary of State

**Entity Name:** BUCCANEER PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7119 SOUTH TAMIAMI TRAIL  
SUITE A  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

**Current Mailing Address:**

1603 NORTH TAMIAMI TRAIL  
SARASOTA, FL 34236 US

**New Mailing Address:**

C/O JOSEPH CASADIO  
934 BLVD OF THE ARTS  
SARASOTA, FL 34236 US

FEI Number: 59-2435669      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BROWNING, ROBERT W JR  
1800 SECOND ST STE 888  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

BROWNING, ROBERT W JR  
ONE NORTH TUTTLE AVENUE  
SARASOTA, FL 34237 US

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: ROBERT W. BROWNING, JR.

11/08/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CASADIO, JOSEPH  
Address: 934 BLVD OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

Title: DS ( ) Delete  
Name: CASADIO, ELIZABETH A  
Address: 934 BLVD OF THE ARTS  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: BANK, GREGORY A  
Address: 2120 BEERIDGE RD  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH A. CASADIO

DS

11/08/2005

Electronic Signature of Signing Officer or Director

Date