

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2007 OCT 26 AM 7:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # N06000005047**

1. Entity Name  
**SAN MICHELE AT UNIVERSITY COMMONS  
RECREATION ASSOCIATION, INC.**



Principal Place of Business  
**6003 HONORE AVE., STE. 106  
C/O DIVOSTA HOMES, L.P.  
SARASOTA, FL 34238**

Mailing Address  
**6003 HONORE AVE., STE. 106  
C/O DIVOSTA HOMES, L.P.  
SARASOTA, FL 34238**



2. Principal Place of Business - No P.O. Box #  
**2477 Stickney Point Rd.**

Suite, Apt. #, etc.  
**Suite 118A**

City & State  
**Sarasota FL**

Zip  
**34231**

Country  
**USA**

3. Mailing Address  
**2477 Stickney Point Rd.**

Suite, Apt. #, etc.  
**Suite 118A**

City & State  
**Sarasota FL**

Zip  
**34231**

Country  
**USA**

07052007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**APPLIED FOR**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KURTH, JOSEPH  
6003 HONORE AVE., STE. 106  
C/O DIVOSTA HOMES, L.P.  
SARASOTA, FL 34238**

7. Name and Address of New Registered Agent

Name  
**Casey Grigsby**

Street Address (P.O. Box Number is Not Acceptable)  
**2477 Stickney Point Rd**

Suite  
**Suite 118A**

City  
**Sarasota**

FL Zip Code  
**34231**

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 **Casey Grigsby** DATE **7/5/07**

(NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	D KURTH, JOSEPH 6003 HONORE AVE., STE. 106 SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Ed Stackhouse 9240 Estero Park Commons Blvd. Estero, FL 33928 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATTISTONI, JASON 6003 HONORE AVE., STE. 106 SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Richard McCormick 9240 Estero Park Commons Blvd. Estero, FL 33928 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHEW, CHRISTOPHER 6003 HONORE AVE., STE. 106 SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer Laura Ray 9240 Estero Park Commons Blvd. Estero, FL 33928 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200111555512 10/31/07--01048--008 **61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Ed Stackhouse** DATE **7/5/07** DAYTIME PHONE # **339.495.4829**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR