

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90288 044 ****61.25

DOCUMENT # N06451

1. Entity Name
BEE RIDGE - SAWYER CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**DELLCOR MANAGEMENT, INC.
310 PEARL AVENUE
SARASOTA, FL 34243**

Mailing Address
**DELLCOR MANAGEMENT, INC.
310 PEARL AVENUE
SARASOTA, FL 34243**



2. Principal Place of Business
PROGRESSIVE COMMUNITY MGMT

3. Mailing Address
PROGRESSIVE COMMUNITY MGMT

Suite, Apt. #, etc.
1801 GLENGARY STREET

Suite, Apt. #, etc.
1801 GLENGARY STREET

City & State
SARASOTA, FL

City & State
SARASOTA, FL

Zip
34231

Country
USA

Zip
34231

Country
USA

03282005 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0152627

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DELLCOR MANAGEMENT, INC.
310 PEARL AVENUE
SARASOTA, FL 34243**

7. Name and Address of New Registered Agent

Name
PROGRESSIVE COMMUNITY MANAGEMENT
Street Address (P.O. Box Number is Not Acceptable)
1801 GLENGARY STREET
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

[Signature]

JIM MARKEL

4/15/05

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, 2005**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D HARVEY, FRED
3982 BEE RIDGE RD
SARASOTA, FL 34233 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD PAZULSKI, FRANK
1700 S. TUTTLE AVE
SARASOTA, FL 34239 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD KNAPP, DANIEL
3982 BEE RIDGE RD. STE H
SARASOTA, FL 34233 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS HOWES, ALAN
5451 EAGLES PT. CIRCLE
SARASOTA, FL 34231 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
3982 BEE RIDGE ROAD, #A ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3982 BEE RIDGE ROAD, #B ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS MARKEL, JIM
1801 GLENGARY STREET
SARASOTA, FL 34231 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT SUTTON, WILLIAM
1801 GLENGARY STREET
SARASOTA, FL 34231 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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]

JIM MARKEL

4/15/05 941-921-5393

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #