2000 UNIFORM BUSINESS REPORT (UBR)

ال سية عمر								
DOCUMENT # N10096 1. Entity Name					FILE	U Gʻ. Inti		
MANDARIN GLEN CONDOMINIUM ASSOCIATION, INC.					EURETARY OF STATE STOM OF CORPORATIONS			
Principal Place of Business Mailing Address			<u>.</u>		00 MAR 20 PM 2: 12			
2980 HARTLEY RD WEST STE 4 JACKSONVILLE FL 32257		2180 W SR 434 STE 5000 LONGWOOD FL 32779			(BRISSE) 885 (1811 8811) 18118 (8138 817) 818(1	. ANTHE BEBLE BEBLE BY)(1 S1821 1881	
2. Principal Place of Business 2180 W SR 434		3. Mailing Address						
Suite, Apt. #, etc. 5000		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State LONGWOOD FL		City & State		4. FE	Number 59-2564623	├	oplied For of Applicable	
Zip 3277	Country	Zip	Country	5. Cert	ificate of Status Desired	\$8.75 Add Fee Require		
3∠//_	6. Name and Address of Current F	Registered Agent		7. Nam	ne and Address of New Registere	ed Agent		
	······································		Name	9				
HART, JAMES W JR SENTRY MANAGEMENT INC			Stree	Street Address (P.O. Box Number is Not Acceptable)				
2180 W SR 434 SUITE 5000 LONGWOOD FL 32779			City	City FL Zip Code				
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if englishing (NOTF:	Registered Agent sig	nature required when reinsta	eting) DAT			
FILE NOW: 9. Election Campaign Fi FEE IS \$61.25 Trust Fund Contribution				\$5.00 May Be Make Check Payable to Department of State			,	
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONA	S/CHANGES TO OFFICERS AND	DIRECTORS IN	I 10	
TITLE	PD	Delete	TITLE	T VD		☐ Change	X Addition	
NAME	HAWKINS, NANCY	ES POICE	NAME	MACKOUL,	DORI	_		
STREET ADDRESS	3270 RICKY DR.#2301			3270 RICKY DR #2304				
CITY-ST-ZIP	JACKSONVILLE FL		CITY-ST-ZIP		ILLE FL 32223			
TITLE	D	☐ Delete	TITLE			🔀 Change	☐ Addition	
NAME	BLUNNY, TONY		NAME					
STREET ADDRESS	3720 RICKY DR., SUITE 2004		STREET ADDRES	32223				
CITY-ST-ZIP	JACKSONVILLE FL		CITY-ST-ZIP		-6000 <u>0031,8</u> 3	3246-	<u>6</u>	
TITLE	D HODDIG TOM	Delete	TITLE NAME	}	-03/24/00-			
NAME STREET ADDRESS	NORRIS, TOM		STREET ADDRES	as I	*****61.25) ****** * [01.25	
CITY-ST-ZIP	3270 RICKY DR #1001 JACKSONVILLE FL		CITY-ST-ZIP	32223				
TITLE	VPD		TITLE	PD		X) Change	☐ Addition	
NAME	BARTUSH, ANN	1711/2/2/	NAME					
STREET ADDRESS	3270 RICKY DR, #2304	Mish	STREET ADDRES	s 3270 RICK	XY DR #2301			
CITY-ST-ZiP	JACKSONVILLE FL 32223	<u> </u>	CITY-ST-ZIP					
TITLE -	SD	X Delete	TITLE	SD	DDEN JUNE	Change	Addition X	
NAME	FRICK, JACOB II		NAME STREET ADDRES		DDEN, JUNE BBLEFIELD CIR N			
STREET ADDRESS CITY-ST-ZIP	3270 RICKY DR, #1302		CITY-ST-ZIP		ILLE FL 32224			
	JACKSONVILLE FL 32223	∑ Delete	TITLE	TD	ILLL IL SEEE4	Change	XX Addition	
TITLE NAME	GOTTUSO, NICK	En Delete	NAME	VÄNDERME	ER, DONALD	பாரு	A-A - Collinois	
STREET ADDRESS	3270 RICKY DR SUITE 904		STREET ADDRES	s 3270 RIC	KY DR #1101			
CITY-ST-ZIP	JACKSONVILLE FL 32223		CITY-ST-ZIP	JACKSONV	ILLE FL 32223			
indicator	certify that the information supplied with d on this report or supplemental report is rporation or the receiver or trustee empo	true and accurate and that m	v signature sha	II have the same leg:	al effect as if made under oath: tha	it I am an officer	or director	
	. po. acon or the receiver of historia of the	ith all other like empowered.			- · · · · · · · · · · · · · · · · · · ·			

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ADD :

DIRECTOR STEMPLE, DOROTHY 3270 RICKY DR #902 JACKSONVILLE FL 32223

DIRECTOR STYMOUR, BETTY 3270 RICKY DRIVE #1602 JACKSONVILLE, FEE. 32223