

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
 04-25-2001 90097 020 ****61.25

04/25/2001

DOCUMENT # N13818

1. Entity Name

SARASOTA EASTPOINTE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

**5766 BRONX AVE. STE A
 SARASOTA FL 34231
 US**

Mailing Address

**5766 BRONX AVE. STE A
 SARASOTA FL 34231
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2750637

Applied For

Not Applicable

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

**MANAGEMENT CONCEPTS
 5766 BRONX AVE
 STE A
 SARASOTA FL 34231**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARFIELD, TOBY 5338 EAST POINT LANE SARASOTA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAPERRIERE, TY 5384 SARAPINTE CT SARASOTA FL 34232	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PRESSLEY, JOANNE 672 EASTPOINTE CT. SARASOTA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GLYDER, ROD 655 EAST POINTE CT SARASOTA FL 34232	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRODNAX, FRANK 640 EASTPOINTE CT. SARASOTA FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOWARD, DENNY 5383 SARAPINTE DRIVE SARASOTA FL 34232	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILLER, GARY 720 EASTPOINTE PKWY SARASOTA FL 34232	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GLYDER, ROD 655 EASTPOINTE CT SARASOTA FL 34232	☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)