

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 91072 040 ****61.25

DOCUMENT # N14869

1. Entity Name

**O.N.C. INDUSTRIAL CENTER CONDOMINIUM ASSOCIATION
, INC.**



Principal Place of Business

**6691-A 33RD ST. EAST
SARASOTA FL 34243**

Mailing Address

**6691-A 33RD ST. EAST
SARASOTA FL 34243**

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 **65-0856122**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

DIAZ, KATHIE A

**6691-A 33RD ST. EAST
SARASOTA FL 34243**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME	PTD DIAZ, KATHIE A ☐ Delete
STREET ADDRESS	6691-A 33RD ST. EAST
CITY-ST-ZIP	SARASOTA FL 34243
TITLE NAME	VSD LENGER, CHARLENE ☐ Delete
STREET ADDRESS	700 INDIAN BEACH CIRCLE
CITY-ST-ZIP	SARASOTA FL 34234
TITLE NAME	D KALIN, EDWARD L ☐ Delete
STREET ADDRESS	5252 S. TAMiami TRAIL
CITY-ST-ZIP	SARASOTA FL 34231
TITLE NAME	PD HARMOUNT, JACK S ☐ Delete
STREET ADDRESS	6691 33RD ST E
CITY-ST-ZIP	SARASOTA FL 34243
TITLE NAME	VPD KALIN, EDWARD L ☐ Delete
STREET ADDRESS	5252 SOUTH TAMiami TR
CITY-ST-ZIP	SARASOTA FL 34231
TITLE NAME	☐ Delete
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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:

KATHIE A. DIAZ
SIGNATURE REQUIRED

3/13/03 **756-7252**

CR2E037 (10/02)