

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N29004 (1)

1. Corporation Name

BRECKENRIDGE BUSINESS PARK CONDOMINIUM ASSOCIATI  
ON, INC.

Principal Place of Business

1970 BARBER ROAD  
SARASOTA FL 34240

Mailing Address

1970 BARBER ROAD  
SARASOTA FL 34240



3. Date Incorporated or Qualified  
10/26/1988

3a. Date of Last Report  
02/27/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number  
65-0308662

Applied For  
Not Applicable

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

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GOLLNICK, THEODORE A  
240 N. WASHINGTON BLVD.  
SUITE 400  
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name MARCELLA ELLWOOD  
82 Street Address (P.O. Box Number is Not Acceptable)  
1970 BARBER RD  
83  
84 City SARASOTA FL 85 Zip Code 34240

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Marcella Ellwood*  
Signature, typed or printed name of registered agent and title if applicable

MARCELLA ELLWOOD

8/5/96  
DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME LIPPERT, LAWRENCE D.  
STREET ADDRESS 1970 BARBER ROAD  
CITY-ST-ZIP SARASOTA FL ☒ DELETE

TITLE D  
NAME GOLLNICK, H. MARK  
STREET ADDRESS 1970 BARBER ROAD  
CITY-ST-ZIP SARASOTA FL ☒ DELETE

TITLE D  
NAME BORDNER, LARRY  
STREET ADDRESS 1950 BARBER ROAD  
CITY-ST-ZIP SARASOTA FL ☒ DELETE  
Keep him on.

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D  
12 NAME KEVIN D. ELLWOOD  
13 STREET ADDRESS 1970 BARBER RD  
14 CITY-ST-ZIP SARASOTA FL 34240 ☐ Change ☒ Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE D  
42 NAME MARCELLA ELLWOOD  
43 STREET ADDRESS 1970 BARBER ROAD  
44 CITY-ST-ZIP SARASOTA, FL. 34240 ☐ Change ☒ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE 700001921787  
62 NAME -08/14/96--01040--046  
63 STREET ADDRESS \*\*\*61.25  
64 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Marcella Ellwood* MARCELLA ELLWOOD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/96

Date

(941) 378-0053

Daytime Phone #

CR2E037 (12/95)