## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

## Mar 31, 2002 8:00 am Secretary of State **DOCUMENT # N31089** 1. Entity Name THE OAKS PRESERVE MANAGEMENT ASSOCIATION, INC. 03-31-2002 90333 017 \*\*\*\*61.25 Principal Place of Business Mailing Address 8430 ENTERPRISE CIRCLE 8430 ENTERPRISE CIRCLE SUITE 100 SUITE 100 **BRADENTON FL 34202 BRADENTON FL 34202** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 57-0884474 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired **Fee Required** 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PESHKIN, JOHN R 8430 ENTERPRISE CIRCLE SUITE 100 Zip Code BEADENTON FL 34202 FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01)☐ Addition TITLE TITLE CIRILLO, FRANK NAME NAME Cirillo, Frank 7120 S BENEVA RD STREET ADDRESS STREET ADDRESS 8430 Enterprise Circle, Suite 100 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34238 Bradenton, FL 34202\_\_\_ ☐ Addition TITLE TITLE MARTINELLO, C. MICHAEL NAME NAME Martinello, C., Michael STREET ADDRESS 7120 S BENEVA RD STREET ADDRESS 8430 Enterprise Circle, Suite 100 CITY-ST-ZIP SARASOTA FL 34238 CITY-ST-ZIP Bradenton, FL 34202 DT TITLE ☐ Addition TITLE Delete BAKAN, STEVEN A NAME NAME Bakan, Steven A. 7120 \$ BENEVA RD STREET ADDRESS STREET ADDRESS 8430 Enterprise Circle, Suite 100 CITY-ST-ZIP SARASOTA FL 34238 CITY-ST-ZIP Bradenton, FL 34202 TITLE ☐ Addition ☐ Delete TITLE STRYKER, WILLIAM L DR. NAME NAME 17 BAYHEAD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OSPREY FL 34229 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

MO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR FRANK CITILIO Daytime Phone #