FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 02, 2002 8:00 am Secretary of State **DOCUMENT # N35609** 1. Entity Name 04-02-2002 90066 038 \*\*\*\*61.25 SHEFFIELD GREENE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 5037 RINGWOOD MEADOW 5037 RINGWOOD MEADOW SARASOTA FL 34235 SARASOTA FL 34235 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0168457 Not Applicable Zip Country Country \$8.7.5.Additional\_ 5. Certificate of Status Desired 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) STOKES, REBECCA F **3053 51ST STREET** SARASOTA FL 34234 City 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 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 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 **VPD** TITLE ☐ Delete TITLE ☐ Change ☐ Addition OBSZARSKI, ELEANOR NAME NAME STREET ADDRESS 5684 SHEFFIELD GREENE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SARASOTA FL 34235 TITLE ☐ Delete TITLE ☐ Change ☐ Addition JOHNSON, RALPH NAME STREET ADDRESS 5695 SHEFFIELD GREENE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL DCT-TITLE ☐ Delete TITLE ☐ Addition NAME BILL GUNN STREET ADDRESS STREET ADDRESS 5714 SHEFFIELD GREENE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL ☐ Delete ☐ Addition HINGEL, WALTER NAME STREET ADDRESS 5668 SHEFFIELD GREENE STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34235 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME versteeg, Jeanne NAME STREET ADDRESS 5708 SHEFFIELD GREENE STREET ADDRESS CITY-ST-7IP CITY-ST-7IP SARASOTA FL 34235 TITLE □ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.