## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 17, 2006 8:00 am Secretary of State DOCUMENT # N35609 1. Entity Name 04-17-2006 90340 002 \*\*\*\*61.25 SHEFFIELD GREENE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 2004 LONGMEADOW SARASOTA FL 34235 2004 LONGMEADOW SARASOTA FL 34235 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 65-0168457 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STOKES, REBECCA F Street Address (P.O. Box Number is Not Acceptable) 3053 51ST STREET SARASOTA FL 34234 Zip Code 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. 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 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 **VSD** ☐ Delete TITLE ☐ Change ☐ Addition NAME OBSZARSKI, ELEANOR NAME 5684 SHEFFIELD GREENE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34235 CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition JOHNSON, RALPH NAME NAME STREET ADDRESS 5695 SHEFFIELD GREENE STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP Addition TITLE D. + **XX**Delete TITLE ☐ Change Treasurer/Director Nelson Paradis NAME PHTESEPHALLY SARRY \* NAME STREET ADDRESS 5683KSHEFFIELDKOREENE STREET ADDRESS 5612 Sheffield Greene SARASOTA FLA34265 3423<sup>2</sup>5 CITY-ST-7IP CITY-ST-ZIP Sarasota, TITLE DI-☐ Delete TITLE ■ Addition **X**Xhange Director ANDERSON, RONALD NAME NAME STREET ADDRESS 5718 SHEFFIELD GREENE STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34235 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition BOBINSKI, RICHARD J NAME NAME 5679 SHEFFIELD GREENE STREET ADDRESS STREET ADDRESS SARASOTA FL 34235 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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:

Eleanor OBzarski-Vice Pres. 4/1941) Treasurer