2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 01, 2001 8:00 am DOCUMENT # N36027 **Secretary of State** 1. Entity Name OWNERS' ASSOCIATION AT SUNSET HARBOR, INC. 03-01-2001 90022 017 ****61.25 Principal Place of Business Mailing Address 1712 78TH ST. W. 1712 78TH ST. W. BRADENTON FL 34209 **BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0169366 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name OZARK. DAMIAN M Street Address (P.O. Box Number is Not Acceptable) 2808 MANTEE AVE W. **BRADENTON FL 34205** Zip Code City 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 DATE 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 FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CR2E037 (10/00) TITLE PTD ☐ Delete TITLE Change ☐ Addition ROBERTSON, ERIC B. NAME NAME STREET ADDRESS STREET ADDRESS 1712 78TH ST W CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** TITLE **VPSD** ☐ Delete TITLE Change Addition NAME NAME JAWITZ, JACK C. STREET ADDRESS STREET ADDRESS 2919 26TH ST W CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** TITLE ☐ Delete TITLE Change Addition NAME OZARK, DAMIAN NAME STREET ADDRESS STREET ADDRESS 2808 MANATEE AVE W CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34205 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Channe Addition TITLE ☐ Delete 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 changed, or on an attachment with an address, with all other like empowered.

FILED

BROBENESS 2/25/0, 941 998-3630