

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N37896

FILED  
Apr 23, 2002 8:00 AM  
Secretary of State

Entity Name: CHC OFFICE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

1700 S. TAMIAMI TRAIL  
C/O PROPERTY MANAGEMENT  
SARASOTA, FL 34239 US

## New Principal Place of Business:

## Current Mailing Address:

1700 S. TAMIAMI TRAIL  
C/O PROPERTY MANAGEMENT  
SARASOTA, FL 34239 US

## New Mailing Address:

FEI Number: 65-0206592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BANNON, TOM  
C/O PROPERTY MANAGEMENT  
1700 S TAMIAMI TRAIL  
SARASOTA, FL 34239 US

## Name and Address of New Registered Agent:

FLIPPEN, DENA  
C/O PROPERTY MANAGEMENT  
1700 S TAMIAMI TRAIL  
SARASOTA, FL 34239 US

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: DENA FLIPPEN

04/23/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: REHMANI, MASOOD Z. M  
Address: 6075 RAND BOULEVARD  
City-St-Zip: SARASOTA, FL

Title: VD ( ) Delete  
Name: RUTHERFORD, DONALD  
Address: 6075 RAND BLVD, SUITE 3  
City-St-Zip: SARASOTA, FL

Title: STD ( ) Delete  
Name: BANNON, THOMAS  
Address: 1700 S TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34239

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BEACHEY, DALE  
Address: 1700 S TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34239

Title: STD (X) Change ( ) Addition  
Name: LANE, NELSON  
Address: 1700 S TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34239

Title: D (X) Change ( ) Addition  
Name: FLIPPEN, DENA  
Address: 1700 S TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE BEACHEY

PD

04/23/2002

Electronic Signature of Signing Officer or Director

Date