

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90029 019 ****61.25

001458

DOCUMENT # N42043
 1. Entity Name
THE SOUTHSIDE VILLAGE MERCHANTS' ASSOCIATION, IN

Principal Place of Business 1924 S OSPREY AVE SARASOTA FL 34239 US	Mailing Address 1924 S OSPREY AVE SARASOTA FL 34239 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business'		3. Mailing Address P.O. Box 1325	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Sarasota		City & State Florida	
Zip 34230	Country US	Zip 34230	Country US

4. FEI Number 59-3050780	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent
MORTON, EDDIE
1924 S OSPREY AVE
SARASOTA FL 34239

7. Name and Address of New Registered Agent
 Name **Morton, Eddie**
 Street Address (P.O. Box Number is Not Acceptable)
1924 S. Osprey Ave Suite 202
 City **Sarasota** FL Zip Code **34239**

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 *Eddie Morton* **Eddie Morton, Pres.** **8-6-01**
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
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME PD LEBAR, MARIANN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1815 S OSPREY AVE SARASOTA FL 34239	
TITLE NAME SD JONES, SAM	<input type="checkbox"/> Delete
STREET ADDRESS 1901 OSPREY SARASOTA FL 34239	
TITLE NAME D MORTON, EDDIE	<input type="checkbox"/> Delete
STREET ADDRESS 1924 S OSPREY AVE SARASOTA FL	
TITLE NAME D TRUITT, PAM	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1700 S TAMiami TR SARASOTA FL	
TITLE NAME TTD COFFRIN, TERRY	<input type="checkbox"/> Delete
STREET ADDRESS 1829 OSPREY AVE SARASOTA FL	
TITLE NAME D OLSEN, PAM	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 1920 HILLVIEW GRILL SARASOTA FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME Vice Pres. - Director Schmidt, Dan	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1843 Hillview St Sarasota, FL 34239	
TITLE NAME President - Director Morton, Eddie	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1924 S. Osprey Ave Suite 202 Sarasota, FL 34239	
TITLE NAME Director Puccio, Anthony	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1812 S. Osprey Ave Sarasota, FL 34239	
TITLE NAME Director Riley, Jay	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1924 S. Osprey Ave Suite 201 Sarasota, FL 34239	

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.

SIGNATURE: *Eddie Morton* **Eddie Morton, Pres.** **8-6-01** **941-316-6811**

CR2E037 (5/01)