

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45669

1. Entity Name

SARAMANA ADI, INC.

FILED
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90039 006 ****61.25

Principal Place of Business

4411 BEE RIDGE ROAD #610
~~SUITE 610~~
SARASOTA FL 34233

Mailing Address

4411 BEE RIDGE ROAD #610
~~SUITE 610~~
SARASOTA FL 34233

2. Principal Place of Business

4411 Bee Ridge Rd #610
Suite, Apt. #, etc.

3. Mailing Address

4411 Bee Ridge Rd #610
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
SARASOTA FL

Zip
34233

Country
USA

City & State
Sarasota FL

Zip
34233

Country

4. FEI Number
65-0312552

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ERICKSON, BARBARA
4411 BEE RIDGE ROAD #610
~~SUITE 610~~
SARASOTA FL 34233

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

FILE NOW:
FEE IS \$61.25

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
STREET ADDRESS
CITY-ST-ZIP
PD
KURCZYK, JIM
9011 MIDNIGHT PASS RD.
SARASOTA FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
ERICKSON, BARBARA
4451 CHARING CR RD
SARASOTA FL 34233 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
CRAWFORD, KAREN
5157 SUNYDALE CIRCLE W
SARASOTA FL 34233 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President - PD
RUSSELL CRAWFORD
5484 Ashton Manor Dr
SARASOTA, FL 34233 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
5157 Sunny Dale Circle W

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

BONNIE P. REYES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-01 9413716540
Date Daytime Phone #

CR2E037 (10/00)