

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90021 020 ****61.25

DOCUMENT # N94000003352

1. Entity Name

PALMER PARK OF COMMERCE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

8588 POTTER PARK DR
 SUITE 500
 SARASOTA FL 34238
 US

8588 POTTER PARK DR
 SUITE 500
 SARASOTA FL 34238-5439
 US

2. Principal Place of Business

6142 Clark Center Avenue

3. Mailing Address

6142 Clark Center Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, Florida

City & State

Sarasota, FL 34238

4. FEI Number

65-0525322

Applied For

Not Applicable

Zip

34238

Country

USA

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRYN, M J
 ONE BISCAYNE TOWER, STE 3599
 2 SOUTH BISCAYNE BLVD
 MIAMI FL 33131

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
DP	CASSIDY, EUGENE F	8588 POTTER PARK DR, STE 500	SARASOTA FL 34238	<input type="checkbox"/>			6142 CLARK CENTER AVENUE	SARASOTA, FL 34238	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	BEFFERT, E C	8588 POTTER PARK DR STE 500	SARASOTA FL 34238	<input type="checkbox"/>			6142 Clark Center Avenue	Sarasota, Florida 34238	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	LYNCH, S	3903 NORTHDAL BLVDE, STE 140E	TAMPA FL 33624	<input type="checkbox"/>			PMB #253 3225 S. MacDill Avenue, Suite 129	Tampa, Florida 33629-8171	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>			Director Richard Barth	6142 Clark Center Avenue Sarasota, Florida 34238	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: Eugene F. Cassidy **REQUIRED** EUGENE F. CASSIDY Date: 4/17/00 Daytime Phone #: 941-922-3866

CH2E037 (9/99)