2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State
05-22-2002 90126 020 ****61.25

DOCUMENT # N95000000317

1. Entity Name

STONEYBROOK CLUBSIDE SOUTH ASSOCIATION II, INC.

Principal Place of Business	Mailing Address
5899 WHITFIELD STE 107 SARASOTA FL 34243	5899 WHITFIELD STE 107 SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9031 Town Center Pkwy	9031 Town Center Pkwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton, FL	City & State: Bradenton, FL
Zip: 34202 Country:	Zip: 34202 Country:

4. FEI Number 65-0557772 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ADVANCED MANAGEMENT OF SW FLORIDA ~~5899 WHITFIELD AVE, STE 107~~ 9031 Town Center Pkwy ~~SARASOTA FL 34243~~ Bradenton, FL 34202	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.

02-0

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	PD GIORGETTI, JR., PAUL P.O. BOX 15971 SARASOTA FL 34277	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD WILKOF, CINDY 9620 CLUB SOUTH CIRCLE, #5310 SARASOTA FL 34238	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Lee, Jason 9620 Club South Circle #5204 Sarasota, FL 34238	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUDD, ED 1614 CARIBBEAN DR SARASOTA FL 34231	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD THOMAS J AMES 9620 CLUB SOUTH CIR #5-301 SARASOTA FL 34238	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Treasurer Conner, Dale 9620 Club South Circle # 5305 Sarasota, FL 34238	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED · 4-27-02 · 918-9290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #