

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003566

1. Entity Name

PINESTONE AT PALMER RANCH NO. 5 CONDOMINIUM ASSO

Principal Place of Business

C/O CONDOMINIUM MGMT., INC
1801 GLENGARY ST.
SARSOTA FL 34231-3603

Mailing Address

C/O CONDOMINIUM MGMT., INC
1801 GLENGARY ST.
SARSOTA FL 34231-3603

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0662630

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

CONDOMINIUM MGMT INC
1801 GLENGARY ST
SARSOTA FL 34231

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 PD ☐ Delete
NAME RONALD, FRANKE
STREET ADDRESS 8390 WINGATE DR., UNIT 511
CITY-ST-ZIP SARSOTA FL 34238

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

TITLE VD ☐ Delete
NAME VALE, KAREN V
STREET ADDRESS 8390 WINGATE DR. UNIT 521
CITY-ST-ZIP SARSOTA FL 34238

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

TITLE STD ☐ Delete
NAME WOLFE, RUTH A MRS
STREET ADDRESS 8390 WINGATE DR., UNIT 527
CITY-ST-ZIP SARSOTA FL

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

TITLE A/S ☐ Delete
NAME CLARK, RICHARD P.
STREET ADDRESS 1801 GLENGARY ST.
CITY-ST-ZIP SARSOTA FL 34231

TITLE ☒ Change ☐ Addition
NAME A/S
STREET ADDRESS P. Richard Clark
CITY-ST-ZIP

TITLE AT ☐ Delete
NAME CLARK, PAUL R JR
STREET ADDRESS 1801 GLENGARY ST.
CITY-ST-ZIP SARSOTA FL 34231

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

P. Richard Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-01

Date

P. Richard Clark
(941)921-6393

Daytime Phone #

CR2E037 (10/00)