## 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9600000784 1. Entity Name VICTORIA ESTATES HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 3900 CLARK RD 3900 CLARK RD STE L-1 STE L-1 SARASOTA FL 34233 SARASOTA FL 34233 U\$ US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

## FILED Mar 27, 2002 8:00 am Secretary of State

03-27-2002 90056 024 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

| City & State  City & State  City & State  City & State  Country  C    |                        |  |                                 |                         |                                    |                                 |  |             |  |
|---|------------------------|--|---------------------------------|-------------------------|------------------------------------|---------------------------------|--|-------------|--|
| September   Sept      | City & State Ci        |  | City & State                    | ty & State              |                                    | 4. FEI Number 65-0660426        |  |             |  |
| S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  Name  Street Address (P.O.*Box Number is Not Acceptable)  Street Address (    |                        |  |                                 |                         |                                    |                                 |  | •           |  |
| DOMBER, HARLAN R 3900 CLARK RD STEL-1 SARASOTA FL 34233  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.    City   FL   Zip Code  | Zip Country Zip        |  | Zip                             | Country                 | 5. Certificate of Star             |                                 |  |             |  |
| DOMBER, HARLAN R 3900 CLARK RD STE L1 SARASOTA FL 34233   | 6.                     | Name and Address of Current Re                     | gistered Agent                  |                         | 7. Name and Addre                  | ess of New Registered Ag        | ent  |             |  |
| 3900 CLARK RD STE L-1 SARASOTA FL 34233  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  |                        |  |                                 | Name                    |                                    |                                 |  |             |  |
| 3900 CLARK RD STE L-1 SARASOTA FL 34233  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  | ้ ก็ดนี้เก็ตก นั้นได้ไ | AND D  | <u></u>                         | Street A                | ddress (P.O. Box Number is N       | ot Acceptable)                  | <del>- , , , , , , , , , , , , , , , , , , ,</del> |             |  |
| STEEL I SARASOTA FL 34233  6. 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  FILE NOW: FEE IS \$61.25  B. Election Campaign Financing Trust Fund Contribution.  DATE  FILE NOW: FEE IS \$61.25  B. Election Campaign Financing Trust Fund Contribution.  DATE  FILE NOW: FEE IS \$61.25  B. Election Campaign Financing Trust Fund Contribution.  DEMPSKI, HAZEL  MAKE Check Payable to Department of State Depart | •                      |  |                                 |                         |                                    |                                 |  |             |  |
| SARASOTA FL 34233  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, hyper or printed name of impatement agent and title it applicable.  POTE Projective Agent signature included agent, or both, in the state of Florida.  PATE  FILE NOW: FEE IS \$61.25  8. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT SIGNATURE 24000 RAMPART BLVD LOT 11  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  PORT CHARLOTTE FL 33980  11. ADDITIONS/CHANGES   |                        | ,  |                                 |                         |                                    |                                 |  |             |  |
| SIGNATURE      |                        | 34333  |                                 | City                    | City                               |                                 |  | Zip Code    |  |
| FILE NOW: FEE IS \$61.25  B. 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    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    10. OFFICERS AND BEED AND AND ADDITIONS IN 10    10. OFFICERS AND BEED AND ADDITIONS IN 1  | ONTROUTA FE            |  |                                 |                         | FL.                                |                                 |  |             |  |
| FILE NOW: FEE IS \$61.25  \$. Election Campaign Financing   | 8. The above name      | ed entity submits this statement for th            | e purpose of changing its re    | egistered office o      | r registered agent, or both, in th | ne state of Florida.            |  |             |  |
| FILE NOW: FEE IS \$61.25  \$. Election Campaign Financing   |                        |  |                                 |                         |                                    |                                 |  |             |  |
| FILE NOW: FEE IS \$61.25  \$. Election Campaign Financing   |                        |  |                                 |                         |                                    |                                 |  |             |  |
| 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 DEMPSKI, HAZEL   |                        | ure hined or printed name of renistered agent and  | title if applicable (NOTE:      | Registered Agent signat | ure required when reinstation)     | DATE                            |  |             |  |
| Trust Fund Contribution.   Added to Fees   Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE   VD   DEMPSKI, HAZEL   DEMPSKI, HAZE    |                        | ira, typed or printed hame or registered agent and | (1012.                          |                         | are required when removering,      |                                 |  |             |  |
| Trust Fund Contribution.   Added to Fees   Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE   VD   DEMPSKI, HAZEL   DEMPSKI, HAZE    |                        |  |                                 |                         |                                    |                                 |  |             |  |
| 10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  DEMPSKI, HAZEL  2400 RAMPART BLVD LOT 11  STREET ADDRESS  THE  DAL  MURPHY, JACK  STREET ADDRESS  THE ADDRESS  THE  DAL  MURPHY, JACK  STREET ADDRESS  THE  TO  THE  NAME  STREET ADDRESS  THE  TO  STREET ADDRESS  THE  THE  NAME  STREET ADDRESS  THE  THE  NAME  STREET ADDRESS  THE  THE  THE  THE  THE  THE  THE   | FILE                   | NOW: FEE IS \$61.25                                |                                 |                         |                                    |                                 |  |             |  |
| TITLE DEMPSKI, HAZEL  | ₫.                     |  | Trust runu Ge                   | minoution.              | Added to Fees                      | Department                      | or State   |             |  |
| TITLE DEMPSKI, HAZEL  | 10                     | OFFICERS AND DIREC                                 | TORS                            | II 11                   | ADDITIONS/CHANGE                   | S TO OFFICERS AND DIRE          | CTORS IN 10  |             |  |
| NAME STREET ADDRESS PORT CHARLOTTE FL 33980  DELOR AMPART BLVD LOT 11  ORT CHARLOTTE FL 33980  DELOR MURPHY, JACK  NAME STREET ADDRESS AND CITY-ST-ZIP PORT CHARLOTTE FL 33980  DELOR MURPHY, JACK  NAME STREET ADDRESS AND CITY-ST-ZIP PORT CHARLOTTE FL 33980  TILE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TILE NAME STREET ADDRESS S    | L) (D)                 | OF FIGURE AND DIFFE                                |                                 |                         | Δħ                                 |                                 |  | Addition    |  |
| CITY-ST-ZIP  PORT CHARLOTTE FL 33980  CITY-ST-ZIP  DAL  MURPHY, JACK  STREET ADDRESS CITY-ST-ZIP  PORT CHARLOTTE FL 33980  CITY-ST-ZIP  PORT CHARL    |                        | PSKI. HAZEL  | Delete                          | NAME                    | DEMPSKI HAZO                       | 5L '                            | L ondingo ∟  | _ 7.007.000 |  |
| CITY-ST-ZIP  PORT CHARLOTTE FL 33980  CITY-ST-ZIP  DAL  MURPHY, JACK  STREET ADDRESS CITY-ST-ZIP  PORT CHARLOTTE FL 33980  CITY-ST-ZIP  PORT CHARL    |                        |  |                                 | STREET ADDRESS          | 24000 RAMPAR                       | T BLVD LOT!                     | 1  |             |  |
| TITLE NAME NURPHY, JACK WIRPHY, JACK STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME FEENEY, BRENDA STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME FEENEY, BRENDA STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL     |                        |  |                                 |                         |                                    |                                 |  |             |  |
| NAME STREET ADDRESS 2400 RAMPART BLVD., LOTT7 CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE TO NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE TO NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE TO NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE PD NAME HYMES, WILLIAM R STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME HYMES, WILLIAM R STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE SD Delete TITLE STREET ADDRESS S    | DAT                    |  | M Delete                        |                         | ,                                  |                                 |  | Addition    |  |
| STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE TD FEENEY, BRENDA STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE TD FEENEY, BRENDA STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME HYMES, WILLIAM R STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TITLE SD Delete TITLE SD Delete TITLE SD Delete TITLE SD DELET STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TITLE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TITLE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  Delete TITLE STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE STREET ADDRESS CITY-ST-ZIP PORT     |                        | PHY. JACK  | Detete                          | đ                       | • •                                | -                               | <b>3</b> 0/10/190                                  |             |  |
| CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME FEENEY, BRENDA STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE PO NAME NAME PORT CHARLOTTE FL 33980  TITLE PO NAME NAME NAME NAME NAME NAME NAME NAME   | T T                    | -  |                                 |                         |                                    |                                 | 66   |             |  |
| TITLE NAME FEENEY, BRENDA STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980 STREET ADDRESS CITY-ST-ZIP PORT    |                        |  |                                 | CITY-ST-ZIP             | PORT CHARL                         | OTTE EL 33                      | 980  |             |  |
| NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE SD Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE D Change Addition NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE D CHARLOTTE FL 33980  | TO                     |  | Delete                          | TITLE                   | TID                                |                                 |  | Addition    |  |
| CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE PD   |                        | NEY, BRENDA  | . 74 5000                       | R                       | WEBR DANN                          | /                               | • · -  | _           |  |
| CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE PD   | *STREET ADDRESS 2400   | O RAMPART BLVD., LOT 193                           | Andread Comments of the         | STREET ADDRESS          | 24000 RAMP                         | ART BUVO~                       | t-82-  | ,- ·        |  |
| TITLE PD Delete TITLE D Change Addition  NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE SD STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE D Change Addition  NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  TITLE D Change Addition  NAME HAVERS, JIM  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  TITLE D Change Addition  NAME HAVERS, JIM  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  TITLE D Change Addition  NAME FEARN, Row  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  TITLE D Change Addition  NAME FEARN, Row  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  TITLE D Change Addition  NAME FEARN, Row  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  TITLE D Change Addition  NAME FEARN, Row  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33980  | CITY-ST-ZIP POR        | T CHARLOTTE FL 33980                               | •                               | CITY-ST-ZIP             | PORT CHARE                         | DTTE FL                         | 33986  | 7           |  |
| NAME STREET ADDRESS 24000 RAMPART BLVD., LOT 125 STREET ADDRESS 24000 RAMPART BLVD., LOT 125 STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980 CITY-ST-ZIP PORT CHARLOTTE FL 33980 TITLE BEGHIN, LAWRENCE NAME STREET ADDRESS 24000 RAMPART BLVD LOT 164 STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980 CITY-ST-ZIP PORT     | TITLE PD               |  | <b>X</b> Delete                 | TITLE                   | D ·                                |                                 | Change   |             |  |
| CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE SD BEGHIN, LAWRENCE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE Delete NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE NAME STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  | NAME HYM               | ES, WILLIAM R                                      |                                 | NAME                    | CRONAN, RITI                       | 4                               | 4 11   |             |  |
| TITLE  SD  BEGHIN, LAWRENCE  STREET ADDRESS  CITY-ST-ZIP  PORT CHARLOTTE FL 33980  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  PORT CHARLOTTE FL 33980  TO Addition  Addition  Addition  Addition  TO Change  Addition  Addition  TO Change  Addition  Addition  TO Change  Addition  NAME  FEARN, Row  ZA OOO RAMPART BLVD # 40  CITY-ST-ZIP  PORT CHARLOTTE FL 33980  TO Change  Addition  Addition  STREET ADDRESS  CITY-ST-ZIP  PORT CHARLOTTE FL 33980   |                        |  |                                 | STREET ADDRESS          |                                    |                                 |  | :           |  |
| TITLE SD Delete TITLE D Change Addition  NAME SEGHIN, LAWRENCE  STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 33980  TITLE  NAME STREET ADDRESS CITY-ST-ZIP Delete  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-    |                        | T CHARLOTTE FL 33980                               |                                 | CITY-ST-ZIP             | PORT CHARLO                        | TTE, FL 3                       | 3980   |             |  |
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| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TORY CHARLOTTE FL 33980  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TORY CHARLOTTE FL 33980  TITLE  NAME  FEARN, Row  STREET ADDRESS  CITY-ST-ZIP  ORT CHARLOTTE FL 33980  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   |                        | · · · · · · · · · · · · · · · · · · ·              |                                 | NAME                    | HAVERS, SII                        | $\eta$                          |  |             |  |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TORY CHARLOTTE FL 33980  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TORY CHARLOTTE FL 33980  TITLE  NAME  FEARN, Row  STREET ADDRESS  CITY-ST-ZIP  ORT CHARLOTTE FL 33980  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   |                        |  |                                 |                         | 24000 RAMPA                        | AT BLVD, H                      | /53  |             |  |
| TITLE 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  | CITY-ST-ZIP POR        | T CHARLOTTE FL 33980                               |                                 | CITY-ST-ZIP             | PORT CHARL                         | OTTE, FC 3                      | 3980   |             |  |
| NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  PORT CHARLOTTE FL., 33980  12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information   | TITLE                  |  | ☐ Delete                        | TITLE                   | <b>5</b> 0.                        | Γ                               | Manage E   | Addition    |  |
| 12. Thereby 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  | NAME                   |  |                                 | NAME                    | FEARN, ROI                         | <b>Y</b>                        |  |             |  |
| 12. Thereby 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  | STREET ADDRESS         |  |                                 | STREET ADDRESS          | 24000 RAMP.                        | art Blvo #                      | · 40   | _           |  |
| 12. Thereby 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  | CITY-ST-ZIP            |  |                                 | CITY-ST-ZIP             | PORT CHAR                          | LOTTE FL                        | -, 3398  | 80          |  |
|   | 12. I hereby certify   | that the information supplied with this            | s filing does not qualify for t | the exemption sta       | ted in Section 119.07(3)(i). Flor  | ida Statutes. I further certify | v that the inform                                  | mation      |  |