

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001507

1. Entity Name

VILLAGE AT BEEKMAN PLACE SECTION 3 CONDOMINIUM A

Principal Place of Business

Mailing Address

290 COCOANUT
SARASOTA FL 34236

290 COCOANUT
SARASOTA FL 34236

2. Principal Place of Business

4301 32nd St. W.

3. Mailing Address

← Same

Suite, Apt. #, etc.

Suite A19

Suite, Apt. #, etc.

← Same

City & State

Bradenton, FL

City & State

← Same

Zip

34205

Country

U.S.A.

Zip

← same

Country

U.S.A.

6. Name and Address of Current Registered Agent

~~MUSTARI, RONALD~~
290 COCOANUT
SARASOTA FL 34236

4301 32nd St. W., Suite A19
Bradenton, FL 34205

7. Name and Address of New Registered Agent

Name CTS Condominium Management Services, Inc.

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

4301 32nd St. W.

Suite A19

City

Bradenton,

FL

Zip Code

34205

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 *Sandra Fuller*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-19-00

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 D
NAME MUSTARI, RONALD
STREET ADDRESS 290 COCOANUT
CITY-ST-ZIP SARASOTA FL 34236

☒ Delete

TITLE D
NAME MUSTARI, JOANNE
STREET ADDRESS 290 COCOANUT
CITY-ST-ZIP SARASOTA FL 34236

☒ Delete

TITLE D
NAME VOORHEES, JOAN
STREET ADDRESS 290 COCONUT AVE
CITY-ST-ZIP SARASOTA FL

☒ 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 D
NAME TROY SPENCER
STREET ADDRESS 4457 Edinbridge Cir.
CITY-ST-ZIP SARASOTA, FL 34235

☒ Change ☐ Addition

TITLE D
NAME Charlotte Kunkel
STREET ADDRESS 4389 Edinbridge Cir
CITY-ST-ZIP Sarasota, FL 34235

☒ Change ☐ Addition

TITLE D
NAME Sandra Fuller
STREET ADDRESS 4393 Edinbridge Cir.
CITY-ST-ZIP Sarasota, FL 34235

☒ Change ☐ Addition

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: *Sandra L. Fuller*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 14, 2000

Date

(941)358-6709

Daytime Phone #

FILED

Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90105 029 ****61.25

00040322



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0569992

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E037 (9/99)