

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004216

1. Entity Name

DO THE RIGHT THING OF SARASOTA COUNTY, INC.

FILED
Aug 01, 2000 8:00 am
Secretary of State

08-01-2000 90114 008 ****61.25

Principal Place of Business

1729 TAMiami TRAIL SOUTH
VENICE FL 34293

Mailing Address

1729 TAMiami TRAIL SOUTH
VENICE FL 34293

2. Principal Place of Business

1350 RIDGEWOOD AVE

Suite, Apt. #, etc.

3. Mailing Address

PO BOX

Suite, Apt. #, etc.

City & State

VENICE, FL.

City & State

NORTH PORT, FL.

Zip
34293

Country
US

Zip
34287

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0920425

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILONAS, TASO M
1515 RINGLING BLVD., #900
SARASOTA FL 34236

7. Name and Address of New Registered Agent

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

After September 13, 2000 min. will be \$236.25

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 KLINGENSMITH, H. JACK
STREET ADDRESS 1515 RINGING BOULEVARD, SUITE 900
CITY-ST-ZIP SARASOTA FL 34236

☐ Delete

TITLE D
NAME KLEINLIEN, KENNETH
STREET ADDRESS 1840 HUDSON STREET
CITY-ST-ZIP ENGLEWOOD FL 34223

☐ Delete

TITLE D
NAME LEWIS, JOHN
STREET ADDRESS 2050 RINGLING BLVD
CITY-ST-ZIP SARASOTA FL 34238

☒ Delete

TITLE D
NAME SLAPP, JOSEPH
STREET ADDRESS 1350 RIDGEWOOD AVE
CITY-ST-ZIP VENICE FL 34293

☐ Delete

TITLE D
NAME YURCHUCK, DAVID
STREET ADDRESS 5650 NORTH PORT BLD.
CITY-ST-ZIP NORTH PORT FL 34287

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME JOLLY, GORDON
STREET ADDRESS 2050 RINGLING BLVD
CITY-ST-ZIP SARASOTA FL 34237

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME KINTZ, JOHN W.
STREET ADDRESS 501 BAY ISLE ROAD
CITY-ST-ZIP LONGBOAT KEY FL 34228

☐ 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/26/00

941-426-3114

Date

Daytime Phone #

CR2E037 (5/00)