

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # N97000004593

THE GLENRIDGE ON PALMER RANCH, INC.

Principal Place of Business
3900 CLARK RD BLDG M
SARASOTA FL 34233

US

Mailing Address

5176 SUNNYDALE CIR., W. SARASOTA FL 34233

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90134 028 ****70.00



Principal Pl	Place of Business 2a. Mailing Address				3. Date Incorporated or Qualifed					
8590	Potter Park Dr.	Same as #2			08/08/1997					
Suite, Apt.	#, etc	Suite, Apt. #, etc.	-		4. FEI Number			lied For-		
2Suite A		27			59-3472733			Applicable		
City & State Saraso	9	City & State			5. Certifcate of Status Desired	X	\$8.75 A	l II		
Zip	Country	Zip	Country	7	6. Election Campaign Financing	\$5.00 May Be				
₄ 34238 −	34238 -9852 25 USA 29 30				Trust Fund Contribution Added to Fees			Fees		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
				Name	o Coorgo					
GEHLBACH, DONALD D				Eugene George 82 Street Address (P.O. Box Number is Not Acceptable)						
3948 SOMERSET COVE DR.				22 S. Tuttle Ave., Suite #3						
SARASOTA FL 34242							as Zin C	odo		
				84 City Sarasota FL 85 Zip Code 34237						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered										
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with any accept the obligations of Section 617.0503. Florida Statutes.										
Fixtono Coordo										
SIGNATURE	Signature, typed or printed name of registered agent a		egistered Age	nt ngriature rec	quired when reinstating)	DATE				
12.	OFFICERS AND		13. (7	ADDITIONS/CHANGES TO OFF					
TITLE	DV	□ DELETE	1.1 TITLE	İ	D		🔼 Change	Addition		
NAME	GEHLBACH, DONALD		1.2 NAME		Gehlbach, Donald)		
STREET ADDRESS	3948 SOMERSET COVE DR.		1.3 STREE	T ADDRESS	Same address					
CITY-ST-ZIP	SARASOTA FL 34242		1.4 CITY-\$	T-ZIP	pene dadress					
TITLE	D	☐ DELETE	2.1 TITLE		VT		Change	Addition		
NAME	HANSEN, PAUL		2.2 NAME	i	.Jim Rutledge			ì		
STREET ADDRESS	3102 JESSIE HARBOR		2.3 STREE	TADDRESS	1801 Glengary #202			1		
CITY-ST-ZIP	OSPREY FL 34229	• •	2.4 CITY-	ST-ZIP	Sarasota, FL 34231		<u>.</u>			
TITLE	D	⊠ DELETE	3.1 TITLE		T		☐ Change	XX Addition		
NAME	HANSEN, PAUL			Ì	Ted Ewing					
STREET ADDRESS			3.3 STREE	TADORESS	7377 Regina Royale					
CITY-ST-ZIP	1		3.4. CITY-	ST-ZIP	Sarasota, FL 34238					
TILE	DS	☐ DELETE	4.1 TITLE		VP		Change	☐ Addition		
NAME	MUENZMAY, DON		4. 2 NAME		Don Muenzmay					
STREET ADDRESS	3289 FAIRHAVEN LN.		4.3 STREE	TADDRESS	same address			1		
C/TY-\$T-ZIP	SARASOTA FL 34239		4.4 CITY-S	iT-ZIP						
TITLE	D	☐ DELETE	5.1 TITLE		D		Change	Addition		
NAME	PALMERI, CHARLES J		5.2 NAME	.	Don Hayner			l		
STREET ADDRESS.	i		5.3 STREE	T ADDRESS	310 Banana Patch Cour	t.				
CITY-ST-ZIP	OSPREY FL 34229		5.4 CITY-S	ST-ZIP	Sarasota, FL 34229	_				
TITLE	DP	☐ DELETE	6.1 TITLE	1	D		Change	Addition		
NAME	REYNOLDS, JOSEPH E		6.2 NAME	-	Joseph E. Reynolds	•				
STREET ADDRESS			6.3 STREE	T ADDRESS	Same address			ļ		
CITY-ST-ZIP	SARASOTA FL 34233		6.4 CITY-S	ST-ZIP	Dane address			Ì		
UIT 1*31*4F	UMUMUU (A L. 1964)		-							

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 annual report or supplemental annual 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 of gustee empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Fran Carroll 4/14/99

Date

941/927-7818

Daytime Phone #

alltand 401067-90134 **FILE NOW: FILING FEE IS \$61.25** NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 DOCUMENT # **N97000004593** 1. Corporation Name THE GLENRIDGE ON PALMER RANCH, INC. Principal Place of Business Mailing Address 5176 SUNNYDALE CIR., W. 3900 CLARK RD BLDG M SARASOTA EL 34233 SARASOTA FL 34233 Date Incorporated or Qualifed 2. Principal Place of Business 2a. Mailing Address 08/08/1997 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 59-3472733 22 Not Applicable City & State City & State \$8.75 Additional 5. Certificate of Status Desired \square . Fee Required 23 28 Zip Country \$5.00 May Be Zip ountry 6. Election Campaign Financing 29 30 Trust Fund Contribution Added to Fees 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent GEHLBACH, DONALD D 82 Street Address (P.O. Box Number is Not Acceptable 3948 SOMERSET COVE DR. 83 SARASÓTA FL 34242 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. التكليف سي الرجوان Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) (11/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change 1 1 TITLE THILE GEHLBACH, DONALD 12 NAME John Davidson CR2E037 NAME 3948 SOMERSET COVE DR. 1.3 STREET ADDRESS 1281 S. Trail STREET ADDRESS 3111 SARASOTA FL 34242 Sarasota, FL 34239 1.4 CITY-ST-ZIP CITY-ST-ZIP X Addition ΠΠE DELETE 21 TITLE Asst. S. ☐ Change HANSEN, PAUL 22 NAME NAME Russ Wiltshire 3102 JESSIE HARBOR 2.3 STREET ADDRESS STREET ADORESS 4031 Wiltshire Circle E. OSPREY FL 34229 2. 4 CITY-ST-ZIP Sarasota, FL 34238 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE Р NAME HANSEN, PAUL 3.2 NAME Mary Fran Carroll 4719 Harvest Bend 946 MACEWEN DR. 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP Sarasota, FL 34235 OSPREY FL 34229 CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4.2 NAME Barbara Hebert NAME MUENZMAY, DON 7110 LaRonda Court 4.3 STREET ADDRESS STREET ADDRESS 3289 FAIRHAVEN LM SARASOTA FL 34239 Saraspta, FL 34238 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME PALMERI, CHÁRLES J NAME 5.3 STREET ADDRESS 229 ST. JAMES PK. STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP OSPREY/FL 34229 6.1 TITLE ☐ Addition ☐ DELEGE Change Change TITLE DP NAME REYNOLDS, JOSEPH E 6.3 STREET ADDRESS 5176 SUNNYDALE CIR., W. 6.4 CITY-ST-ZIP ŚARASOTA FL 34233 CITY-ST-ZIP 14. I hereby cartify 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR