

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003250

1. Entity Name

COVERED BRIDGE ESTATES PHASE I ASSOCIATION, INC.

Principal Place of Business

6604 37TH STREET EAST
ELLENTON FL 34222

Mailing Address

6312 US HIGHWAY 301 N PMB#396
ELLENTON FL 34222

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0841220

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DASENBERG, TREY
6604 37TH STREET EAST
ELLENTON FL 34222

7. Name and Address of New Registered Agent

Name DESENBERG, TREY

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

City ELLENTON FL Zip Code 34222

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 Trey Desenberg, President 4/15/02

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

TITLE PD
NAME DESENBERG, TREY ☐ Delete
STREET ADDRESS 8466 N LOCKWOOD RIDGE RD, SUITE 300
CITY-ST-ZIP SARASOTA FL 34243

TITLE VD
NAME WILSON, DAVID ☒ Delete
STREET ADDRESS 8466 N LOCKWOOD RIDGE RD, SUITE 300
CITY-ST-ZIP SARASOTA FL 34243

TITLE STD
NAME LECOMTE, ADELA ☐ Delete
STREET ADDRESS 8466 N LOCKWOOD RIDGE RD, SUITE 300
CITY-ST-ZIP SARASOTA FL 34243

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Trey Desenberg ☒ Change ☐ Addition
NAME
STREET ADDRESS 6312 US Hwy 301 N. PMB 396
CITY-ST-ZIP ELLENTON FL 34222

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

TITLE ADELA LECOMTE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6312 US HWY 301. N # 396
CITY-ST-ZIP ELLENTON FL 34222

TITLE DIRECTOR ☐ Change ☒ Addition
NAME STEVE ARRINGTON
STREET ADDRESS 6312 US. HWY 301. N. # 396
CITY-ST-ZIP ELLENTON FL 34222

TITLE ☐ Change ☐ Addition
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: Trey Desenberg, Pres. 9/15/02 941-755-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)