2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State
04-11-2003 90164 014 ****61.25

DOCUMENT # N99000001576

1. Entity Name

VILLAGE ON CRESCENT LAKE AT BRECKENRIDGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
17595 S TAMIAMI #100 FORT MYERS FL 33908	17595 S TAMIAMI #100 FORT MYERS FL 33908

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
c/o PEGASUS	c/o PEGASUS
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-1010152 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STILSON, BARBARA 17595 S TAMIAMI TRAIL #100 FORT MYERS FL 33908	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. I am familiar with, and accept the obligations of registered agent.

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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP LOTURCO, JOSEPH D 19850 BRECKENRIDGE DRIVE ESTERO FL 33928	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 19851 BRECKENRIDGE DR, #104
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV PICCIOCCA, TIM 52 CORPORATE CIRCLE ALBANY NY 12212	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 302 WASHINGTON AVE. EXT. ALBANY, NY 12203
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST SULLIVAN, JOHN 52 CORPORTE CIRCLE ALBANY NY 12203	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 302 WASHINGTON AVE. EXT. ALBANY, NY 12203
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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 4/9/03 239-454-8568