

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

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90011 016 ****61.25

DOCUMENT # N99000003227

1. Entity Name

THE BENT TREE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**961 CHARLOTTE AVENUE
SARASOTA FL 34237**

Mailing Address

**% KAREN MAIDEN
961 CHARLOTTE AVE.
SARASOTA FL 34237**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0926930**

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

**MAIDEN, KAREN
961 CHARLOTTE AVENUE
SARASOTA FL 34237**

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 **MD/V P** ☐ Delete
NAME **CHADWICK, JO**
STREET ADDRESS **4500 BENT TREE BLVD**
CITY-ST-ZIP **SARASOTA FL 34241**

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

TITLE **PD/ST** ☒ Delete
NAME **FERNANDEZ, TERESA**
STREET ADDRESS **541 STRASBURG DR**
CITY-ST-ZIP **SARASOTA FL 33954**

TITLE **D/ST** ☒ Change ☐ Addition
NAME **Teresa Fernandez**
STREET ADDRESS **1303 Weeping Willow Dr**
CITY-ST-ZIP **Sarasota, FL 34241**

TITLE **MD/P** ☒ Delete
NAME **DERGMAN, ART**
STREET ADDRESS **PO BOX 10714**
CITY-ST-ZIP **BRADENTON FL 34282**

TITLE **D/P** ☒ Change ☐ Addition
NAME **Art Bergman**
STREET ADDRESS **4510 Bent Tree Blvd.**
CITY-ST-ZIP **Sarasota, FL 34241**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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: *Art Bergman* **REARBERG, President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/03

941-362-4395

CR2E037 (10/02)