

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90021 048 ****61.25

DOCUMENT # N99000003671

1. Entity Name

WEST BAY NEIGHBORHOOD ASSOCIATION, INC.

LN

Principal Place of Business

**7512 N. TAMiami TRAIL
 SARASOTA FL 34243**

Mailing Address

**7512 N. TAMiami TRAIL
 SARASOTA FL 34243**

2. Principal Place of Business

7512 N. TAMiami TRAIL

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

FLORIDA

4. FEI Number

65-0659177

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**HINES, RONALD S
 7512 N. TAMiami TRAIL
 SARASOTA FL 34243**

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 12, 2001, 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 **PD** ☐ Delete
 NAME **HINES, RONALD**
 STREET ADDRESS **7512 N. TAMiami TRAIL**
 CITY-ST-ZIP **SARASOTA FL 34243**

TITLE **VD** ☐ Delete
 NAME **ROTH, DANIEL**
 STREET ADDRESS **3938 MEGELLAN WAY**
 CITY-ST-ZIP **SARASOTA FL 34243**

TITLE **SD** ☐ Delete
 NAME **RUSH, YURI**
 STREET ADDRESS **218 GAINES AVE.**
 CITY-ST-ZIP **SARASOTA FL 34243**

TITLE **TD** ☒ Delete
 NAME **BARBER, STEVE**
 STREET ADDRESS **316 SCOTT AVE.**
 CITY-ST-ZIP **SARASOTA FL 34243**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 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:

RONALD S. HINES

11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Board Member** ☐ Change ☒ Addition
 NAME **Felix Bermudez**
 STREET ADDRESS **7512 N. TAMiami TRAIL**
 CITY-ST-ZIP **SARASOTA, FL 34243**

TITLE **Board Member** ☐ Change ☒ Addition
 NAME **VANCE WILSON**
 STREET ADDRESS **4 Chachajaca Rd**
 CITY-ST-ZIP **Brownsville TEXAS 78523**

TITLE **Board Member** ☐ Change ☒ Addition
 NAME **MAIA MONTAYA**
 STREET ADDRESS **618 606A Ave East**
 CITY-ST-ZIP **BRADENTON, FL 34203**

TITLE **Board Member** ☐ Change ☒ Addition
 NAME **LAURA STEWART**
 STREET ADDRESS **3010 47th St.**
 CITY-ST-ZIP **SARASOTA, FL 34234**

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

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

(941) 359-0601

7-18-01

CR2E037 (5/01)