

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90008 037 ***558.75

DOCUMENT # P00000056012

1. Entity Name
 SEASONAL RESORT SERVICES, INC.

Principal Place of Business
 412 Hunter Drive
 Venice, FL 34285

Mailing Address
 412 Hunter Drive
 Venice, FL 34285

C0072664

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
 65-1015718

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

Alexander G. Paderewski, Esquire
 1834 Main Street
 Sarasota, Florida 34236

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** _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Kristopher Knop 412 Hunter Drive Venice, Florida 34285	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____ **6/28/01** **941-366-5150**

CR2E034 (11/00)

Attachment

Doc#

5/20/01
PADEREWSKI, DANNHEISSER & SWEETING, P.A.
C-00186664

ALEXANDER G. PADEREWSKI
B. V. DANNHEISSER, III

ATTORNEYS AT LAW
1834 MAIN STREET
SARASOTA, FLORIDA 34236
(941) 365-7600
FAX (941) 366-6324

MICHAEL E. SWEETING
MARK T. FLAHERTY

June 28, 2001

Division of Corporation
409 East Gaines Street
Tallahassee, Florida 32399

Re: Seasonal Resort Services, Inc.

Dear Sir:

Please find enclosed a Uniform Business Report, which I am filing herewith on behalf of Seasonal Resort Services, Inc. I am providing you with a check in the amount of \$558.75, which includes an additional \$8.75 for a certified certificate of good standing. I would appreciate your providing me with that document at your earliest opportunity at the above address.

Your cooperation is appreciated.

Very truly yours,



ALEXANDER G. PADEREWSKI

AGP/as
Enclosures