

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000007043

1. Entity Name

CHARTWELL PROPERTY DEVELOPMENT AND INVESTMENT IN

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90010 030 ***150.00

Principal Place of Business

Mailing Address

800 S. OSPREY AVENUE
SARASOTA FL 34236-7834
US

800 S. OSPREY AVENUE
SARASOTA FL 34236-7834
US

2. Principal Place of Business

3800 S. TAMiami TR.

3. Mailing Address

P.O. Box 6233

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

~~50-1884603-~~
65-0781769

Applied For

Not Applicable

Zip

34239

Country

U.S.A

Zip

34278

Country

U.S.A

5.

75 Additional
Required

6. Name and Address of Current Registered Agent

7.

Please note

INCORRECT

F.E.I numbers.

Correct number
substituted above

TURNER, JAMES L
200 SOUTH ORANGE AVENUE
SARASOTA FL 34236

Name

Street Address (P.O. E

City

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, 2000 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 ☐ Delete
NAME P
STREET ADDRESS SPARROW, BLAIR
CITY-ST-ZIP 800 S. OSPREY AVENUE
SARASOTA FL 34236-7834

TITLE ☒ Change ☐ Addition
NAME PRESIDENT
STREET ADDRESS SPARROW, BLAIR
CITY-ST-ZIP 131 MAIN STREET
OSPREY FL 34229

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME VICE PRESIDENT, GENERAL
STREET ADDRESS SPARROW, HELEN COUNSEL
CITY-ST-ZIP 376 WEST ROYAL FLAMINGO DR.
SARASOTA FL 34236

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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CITY-ST-ZIP

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

13. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HELEN L SPARROW

Date

3-28-00

Daytime Phone #

(941) 726 2839

CR2E034 (9/99)