

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000000441

1. Entity Name

MANAGEMENT SERVICES OF SARASOTA, INC.

FILED

Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90005 028 ***150.00

Principal Place of Business

Mailing Address

~~4710 GLENBROOKE TERR~~
SARASOTA FL 34243
US

~~4713 GLENBROOKE TERR~~
SARASOTA FL 34243-4326
US

2. Principal Place of Business

6150 TURNBURY PARK DR.

Suite, Apt. #, etc.

3305

3. Mailing Address

6150 TURNBURY PARK DR.

Suite, Apt. #, etc.

3305

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34243

Country

USA

Zip

34243

Country

USA

6. Name and Address of Current Registered Agent

GIL, EDITO M JR

~~4713 GLENBROOKE TER~~
SARASOTA FL 34243

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6150 TURNBURY PARK DR.

SUITE 3305

City

SARASOTA

FL

Zip Code

34243

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

TITLE PD ☐ Delete
NAME EVERITT, SUSAN E
STREET ADDRESS ~~4636 QUARTERHORSE RD.~~
CITY-ST-ZIP ~~N CHARLESTON SC 29420~~

TITLE TSD ☐ Delete
NAME GIL, EDITO M JR
STREET ADDRESS ~~4713 GLENBROOKE TER~~
CITY-ST-ZIP SARASOTA FL 34243

TITLE D ☐ Delete
NAME GIL, ISABEL R
STREET ADDRESS 4542 DEKALB AVE
CITY-ST-ZIP JAX FL 32207

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1032 ROSEWOOD LANE
CITY-ST-ZIP MOUNT PLEASANT, SC 29464

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6150 TURNBURY PARK DR., SUITE 3305
CITY-ST-ZIP

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

TITLE ☐ Change ☒ Addition
NAME VD
NAME GIL, KATHY D.
STREET ADDRESS 6150 TURNBURY PARK DR., STE 3305
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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)(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:

EDITO M. GIL, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/00

Date

(941) 359-1209

Daytime Phone #