

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90101 007 ***150.00

DOCUMENT # P99000045285

1. Entity Name

NORTHERN OF SARASOTA, INC.

Principal Place of Business

Mailing Address

**7341 BALLANTRAE
 SARASOTA FL 34238**

**7341 BALLANTRAE
 SARASOTA FL 34238-2802**

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

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

**CAREY, JOHN J
 7434 PERIWINKLE DR.
 SARASOTA FL 34231**

Name

Gary Bradshaw

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

7802 Spun Court

City

Sarasota

FL

Zip Code

34237

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

John J. Carey
 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

1/20/00
 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 **D** ☒ Delete
 NAME **SLUETZ, EDWARD J**
 STREET ADDRESS **7341 BALLANTRAE**
 CITY-ST-ZIP **SARASOTA FL 34238**

TITLE ☐ Change ☐ Addition
 NAME **Gary Bradshaw** ☒ Change ☐ Addition
 STREET ADDRESS **7802 Spun Ct.**
 CITY-ST-ZIP **Sarasota, FL 34237**

TITLE **D** ☐ Delete
 NAME **BRADSHAW, GARY**
 STREET ADDRESS **7802 SPUR COURT**
 CITY-ST-ZIP **SARASOTA FL 34237**

TITLE **PRES.** ☐ Change ☒ Addition
 NAME **Gary Bradshaw**
 STREET ADDRESS **7802 Spun Ct.**
 CITY-ST-ZIP **Sarasota, FL 34237**

TITLE ☐ Delete
 NAME **BRADSHAW, GARY**
 STREET ADDRESS **7802 SPUR COURT**
 CITY-ST-ZIP **SARASOTA FL 34237**

TITLE **Dir.** ☐ Change ☒ Addition
 NAME **Robert Sievenight**
 STREET ADDRESS **4095 Las Palmas Blvd.**
 CITY-ST-ZIP **Sarasota, FL 34238**

TITLE ☐ Delete
 NAME **BRADSHAW, GARY**
 STREET ADDRESS **7802 SPUR COURT**
 CITY-ST-ZIP **SARASOTA FL 34237**

TITLE **Soc. Sec. Treas.** ☐ Change ☒ Addition
 NAME **Susan Bradshaw**
 STREET ADDRESS **7802 Spun Ct.**
 CITY-ST-ZIP **Sarasota, FL 34237**

TITLE ☐ Delete
 NAME **BRADSHAW, GARY**
 STREET ADDRESS **7802 SPUR COURT**
 CITY-ST-ZIP **SARASOTA FL 34237**

TITLE ☐ Change ☐ Addition
 NAME **Susan Bradshaw**
 STREET ADDRESS **7802 Spun Ct.**
 CITY-ST-ZIP **Sarasota, FL 34237**

TITLE ☐ Delete
 NAME **BRADSHAW, GARY**
 STREET ADDRESS **7802 SPUR COURT**
 CITY-ST-ZIP **SARASOTA FL 34237**

TITLE ☐ Change ☐ Addition
 NAME **Susan Bradshaw**
 STREET ADDRESS **7802 Spun Ct.**
 CITY-ST-ZIP **Sarasota, FL 34237**

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]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/00 (941) 358-6015
 Date Daytime Phone #