


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 91072 034 \*\*\*\*61.25

**DOCUMENT # 750250**

1. Entity Name  
**OAKHURST CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business      Mailing Address  
**4255 OAKHURST CIRCLE EAST**      **4255 OAKHURST CIRCLE EAST**  
**SARASOTA FL 34233**      **SARASOTA FL 34233**

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 **59-2093754**      Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**



CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**BECKER & POLIAKOFF**  
**630 S. ORANGE AVENUE**  
**THIRD FLOOR**  
**SARASOTA FL 33578**

**7. Name and Address of New Registered Agent**

Name: **ARGUS PROPERTY MANAGEMENT INC**  
Street Address (P.O. Box Number is Not Acceptable)  
**2477 STICKNEY PL RD**  
**SUITE 118 A**  
City: **SARASOTA FL**      Zip Code: **34231**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *James A. Barry*      **James A. Barry Agent**      **3/4/03**  
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**

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

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>ELLIS, EDWARD</b>	
STREET ADDRESS	<b>4168 OAKHURST CIRCLE WEST</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> Delete
NAME	<b>FRAWLEY, DON</b>	
STREET ADDRESS	<b>4295 OAKHURST CIRCLE EAST</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>DEUTSCH, SID</b>	
STREET ADDRESS	<b>3967 OAKHURST BLVD</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>JERRE, ROBERT</b>	
STREET ADDRESS	<b>3911 OAKHURST BLVD</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>COOK, NORMAN</b>	
STREET ADDRESS	<b>3976 OAKHURST BLVD</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>S</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>KOCH, LOU ANNA</b>	
STREET ADDRESS	<b>3933 OAKHURST BLVD</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	<b>VP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>COHN, REYTON</b>	
STREET ADDRESS	<b>4176 OAKHURST CIRCLE W.</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FRAWLEY, DON</b>	
STREET ADDRESS	<b>4295 OAKHURST CIRCLE EAST</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CERRATO, WILLIAM</b>	
STREET ADDRESS	<b>4007 OAKHURST DR</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>T</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>DWIGHT, THOMAS R</b>	
STREET ADDRESS	<b>4185 OAKHURST CIRCLE W</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>S</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HARTLEY, BETTY JANE</b>	
STREET ADDRESS	<b>4271 OAKHURST CIRCLE EAST</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>JANIS, EDWARD K</b>	
STREET ADDRESS	<b>4045 OAKHURST DR</b>	
CITY-ST-ZIP	<b>SARASOTA FL 34233</b>	

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: *James A. Barry*      **James A. Barry**      **3/4/03**      **941-927-6464**

CR2E037 (10/02)

ATTACHMENT

80058317

Doc # 750250

**OAKHURST CONDOMINIUM ASSOCIATION INC.  
4235 OAKHURST CIRCLE EAST  
SARASOTA, FL. 34233  
941-377-4300**

Continuation of 2003 Not-for Profit Corporation Uniform Business Report:

SECTION 10

D

Johnston, Merle E.  
3982 Oakhurst Blvd.  
Sarasota Fl. 34233