

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

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90707 019 *****61.25

0054033

DOCUMENT # 745129

1. Entity Name

PINEWOODS COMMONS AREA, INC.



Principal Place of Business

**2073 J&C BLVD
NAPLES FL 34109
US**

Mailing Address

**P.O BOX 110339
NAPLES FL 34108
US**

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 **59-2698946**

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

**KUETER, BEVERTY
2073 J&C BLVD
NAPLES FL 34109**

7. Name and Address of New Registered Agent

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

SIGNATURE

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 ~~PD~~ ☐ Delete
NAME **EICHHORN, GORDON**
STREET ADDRESS **1800 MISTY PINES CIRCLE**
CITY-ST-ZIP **NAPLES FL 34105**

TITLE **D** ☐ Delete
NAME **WORRELL, OLIVER**
STREET ADDRESS **800 MISTY PINE CIR #106**
CITY-ST-ZIP **NAPLES FL 34105**

TITLE ~~DS~~ ☐ Delete
NAME **BIRR, MARY**
STREET ADDRESS **2322 PINE WOODS CIRCLE**
CITY-ST-ZIP **NAPLES FL 34105**

TITLE ~~D~~ ☒ Delete
NAME **COLE, DAVI**
STREET ADDRESS **800 MISTY PINE CIR #106**
CITY-ST-ZIP **NAPLES FL 34105**

TITLE ~~DVPS~~ ☒ Delete
NAME **JOHNSON, MINDY**
STREET ADDRESS **2371 PINEWOODS CIR**
CITY-ST-ZIP **NAPLES FL 34105**

TITLE ~~TD~~ ☐ Delete
NAME **GRIMSLEY, MARY**
STREET ADDRESS **1200 MISTY PINES CIRCLE**
CITY-ST-ZIP **NAPLES FL 34105**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE **D, ST** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D, P** ☐ Change ☒ Addition
NAME **KOPKA, Walter**
STREET ADDRESS **2437 PINEWOODS CIR**
CITY-ST-ZIP **NAPLES, FL**

TITLE **D, VP** ☐ Change ☒ Addition
NAME **Leigh DAVID**
STREET ADDRESS **2371 PINEWOODS CIR**
CITY-ST-ZIP **NAPLES, FL**

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 or other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

MARY BIRR

4-28-03 239-263-7403

CR2E037 (10/02)