

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 746923

FILED
Jun 04, 2002 8:00 AM
Secretary of State

Entity Name: BUCKINGHAM AIR PARK AND LANDOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6751 CADET AVENUE
FT. MYERS, FL 33905 US

New Principal Place of Business:

6770 CIRCLE DR.
FT. MYERS, FL 33905 US

Current Mailing Address:

6751 CADET AVENUE
FT. MYERS, FL 33905 US

New Mailing Address:

6770 CIRCLE DR.
FT. MYERS, FL 33905 US

FEI Number: 59-2499589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGER, DEAN N
6751 SEMINOLE AVE
FT MYERS, FL 33905 US

Name and Address of New Registered Agent:

MOXLEY, WILLIAM M
6770 CIRCLE DR.
FT MYERS, FL 33905 US

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: WILLIAM MOXLEY

06/04/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LANCE, ART
Address: 6750 NORTH DR
City-St-Zip: FORT MYERS, FL 33905

Title: D () Delete
Name: SKIBA, ANDREW E
Address: 6761 CIRCLE DR
City-St-Zip: FT MYERS, FL 33905

Title: DT () Delete
Name: BERGER, DEAN
Address: 6751 SEMINOLE AVE
City-St-Zip: FT MYERS, FL 33905

Title: DM (X) Delete
Name: HAAS, ROBERT
Address: 6740 CHEROKEE AVE
City-St-Zip: FT MYERS, FL 33905

Title: DS (X) Delete
Name: MOXLEY, SANDY
Address: 6770 CIRCLE DR
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOXLEY, WILLIAM M
Address: 6770 CIRCLE DR.
City-St-Zip: FORT MYERS, FL 33905

Title: D (X) Change () Addition
Name: ROBINSON, PAT
Address: 6731 CHEROKEE AVE.
City-St-Zip: FT MYERS, FL 33905

Title: D (X) Change () Addition
Name: RICHTER, CHARLES
Address: 6730 CIRCLE DR.
City-St-Zip: FT MYERS, FL 33905

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM MOXLEY

D

06/04/2002

Electronic Signature of Signing Officer or Director

Date