

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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90277 045 ****70.00

DOCUMENT # 748812

1. Entity Name

LAKEWOOD SINGLE FAMILY HOMEOWNERS ASSOCIATION II, INC.



Principal Place of Business

**12636 TAMiami TRAIL EAST
NAPLES FL 34113**

Mailing Address

**12636 TAMiami TRAIL EAST
NAPLES FL 34113**

2. Principal Place of Business

2340 STANFORD COURT

3. Mailing Address

2340 STANFORD COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34112

Country

USA

Zip

34112

Country

USA

4. FEI Number **65-0339505**

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

**COLLIER ASSOCIATION MANAGEMENT
12636 TAMiami TRAIL EAST
NAPLES FL 34113**

7. Name and Address of New Registered Agent

Name

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

2340 STANFORD COURT

City **NAPLES**

FL

Zip Code
34112

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

Dorothy Zantello
Dorothy Zantello

(NOTE: Registered Agent signature required when reinstating)

DATE

4-23-03

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 **GRUHN, GARY**
STREET ADDRESS **4630 LAKEWOOD BLVD**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **VPD** ☐ Delete
NAME **JONES, DANIEL**
STREET ADDRESS **4558 BEECHWOOD LAKE DRIVE**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **SD** ☐ Delete
NAME **BOCK, MAY**
STREET ADDRESS **4579 CHIPPENDALE DRIVE**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **D** ☐ Delete
NAME **LOY, BILL**
STREET ADDRESS **4607 CHIPPENDALE DRIVE**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **TD** ☒ Delete
NAME **BIRKHOLOZ, ROBERT**
STREET ADDRESS **4628 CHIPPENDALE DRIVE**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **D** ☐ Delete
NAME **NULTON, ED**
STREET ADDRESS **4646 CHIPPENDALE DRIVE**
CITY-ST-ZIP **NAPLES FL 34112**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE **VPD** ☐ Change ☒ Addition
NAME **GORDON WUJEK**
STREET ADDRESS **4554 BEECHWOOD LAKE DRIVE**
CITY-ST-ZIP **NAPLES, FL 34112**

TITLE ☐ 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 all other like empowered.

SIGNATURE:

Dorothy Zantello
SIGNATURE REQUIRED

239-280-1400

CR2E037 (10/02)