

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

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90123 002 ****61.25

DOCUMENT # 760560

1. Entity Name
DAVIS WOODS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**C/O W W SCHOO MGMT. INC
9411-2 CYPRESS LAKE DRIVE
FORT MYERS FL 33919**

Mailing Address
**C/O W W SCHOO MGMT. INC
9411-2 CYPRESS LAKE DRIVE
FORT MYERS FL 33919**



2. Principal Place of Business
**9411 Cypress Lake Dr.
Suite 2
Ft. Myers, FL
Zip 33919**

3. Mailing Address
**C/o School Management Inc.
9411-2 Cypress Lake Dr.
Ft. Myers, FL
Zip 33919**

CHECK HERE IF MAKING CHANGES

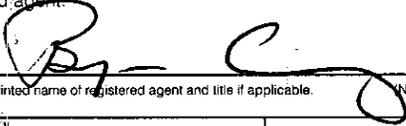
4. FEI Number **59-2138266** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**CRUZ, BRYAN
C/O SCHOOL MGMT. INC.
9441-2 CYPRESS LAKE DR.
FORT MYERS FL 33919**

7. Name and Address of New Registered Agent
Name **BRYAN CAUZ C/o School Management Inc.**
Street Address (P.O. Box Number is Not Acceptable) **9411-2 Cypress Lake Drive**
City **Fort Myers** FL Zip Code **33919**

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  DATE _____

Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

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 NAME STREET ADDRESS CITY-ST-ZIP	D MOGILSKI, STANLEY 16881 DAVIS RD SW #524 FORT MYERS FL 33908 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNCOX, CLARA 16881 DAVIS ROAD SW # 624 FORT MYERS FL 33908 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CATALFU, PETER 16881 DAVIS ROAD SW # 822 FORT MYERS FL 33908 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRESMERY, JANE 16881 DAVIS ROAD SW # 514 FORT MYERS FL 33908 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLICK, ROGER 16881 DAVIS ROAD SW # 216 FORT MYERS FL 33908 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Judy Bavetz 13660 Knot Drive Ft. Myers, FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD John Broesch 16881 Davis Road # 816 Ft. Myers, FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Clara Johncox 16881 Davis Road # 624 Ft. Myers, FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 

4-8-03

CR2E037 (10/02)