

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 760611

1. Entity Name

GRANADA LAKES RV RESORT CONDOMINIUM ASSOCIATION,

**FILED**  
**Mar 14, 2000 8:00 am**  
**Secretary of State**

03-14-2000 90062 034 \*\*\*\*61.25

Principal Place of Business

Mailing Address

7010 GRANADA LAKES DRIVE  
FT. MYERS FL 33912  
US

7010 GRANADA LAKES DRIVE  
FORT MYERS FL 33912-6026  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2262774

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ADAMS, JOSEPH  
13515 BELL TOWER DR.  
SUITE 101  
FT. MYERS FL 33907

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.

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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete  
NAME NESTLE, MATILDA  
STREET ADDRESS 2721 CHAPMAN CT.  
CITY-ST-ZIP PUNTA GORDA FL 33950

TITLE D ☐ Change ☒ Addition  
NAME Cox, Jack  
STREET ADDRESS 7029 Granada Lakes Dr.  
CITY-ST-ZIP Ft. Myers, FL 33912

TITLE T ☐ Delete  
NAME MILLER, SARAH E.  
STREET ADDRESS 7010 GRANADA DRIVE  
CITY-ST-ZIP FT. MYERS FL

TITLE AT ☐ Change ☒ Addition  
NAME Smith, Edith  
STREET ADDRESS 7042 Granada Lakes Dr.  
CITY-ST-ZIP Ft. Myers, FL 33912

TITLE D ☐ Delete  
NAME POWNEY, JAMES  
STREET ADDRESS 17178 POSTORIA LN  
CITY-ST-ZIP FT MYERS FL 33912

TITLE D ☐ Change ☒ Addition  
NAME Walker, Dale  
STREET ADDRESS 17151 Atwater Way  
CITY-ST-ZIP Ft. Myers, FL 33912

TITLE S ☐ Delete  
NAME POWNEY, MARIAN  
STREET ADDRESS 17178 FOSTORIA LN.  
CITY-ST-ZIP FT. MYERS FL 33912

TITLE D ☐ Change ☒ Addition  
NAME Rogers, Raymond  
STREET ADDRESS 17175 Dragonfly Ln.  
CITY-ST-ZIP Ft. Myers, FL 33912

TITLE D ☐ Delete  
NAME DOUCHER, MARCEL  
STREET ADDRESS 17186 CASSELBERRY LN.  
CITY-ST-ZIP FT. MYERS FL 33912

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

TITLE AS ☐ Delete  
NAME MASON, LOIS  
STREET ADDRESS 17191 DRAGONFLY LN.  
CITY-ST-ZIP FORT MYERS FL 33912

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer 94D 267 070 9  
3/8/00 Daytime Phone #

CR2E037 (9/99)