

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766216

1. Entity Name

RIVERWOODS PLANTATION RV RESORT CONDOMINIUM ASSO

Principal Place of Business

Mailing Address

4600 ROBERT E. LEE BLVD.
ESTERO FL 33928

4600 ROBERT E. LEE BLVD.
ESTERO FL 33928

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

59-2449892

Applied For

Not Applicable

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

Name

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

City

FL

Zip Code

ADAMS, JOSEPH E., ESQ.
BECKER, POLIAKOFF & STREITFELD, P.A.
13515 BELL TOWER DR, SUITE 101
FT. MYERS FL 33907

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

TITLE VPD ☐ Delete

NAME OLSON, CLIFF
STREET ADDRESS 4670 LIBERTY LN W
CITY-ST-ZIP ESTERO FL

TITLE PD ☒ Delete

NAME NOLANDER, DONALD
STREET ADDRESS 4500 SAWMILL DRIVE
CITY-ST-ZIP ESTERO FL

TITLE TD ☐ Delete

NAME ARMSTRONG, NORENE
STREET ADDRESS 4500 PILGRIMS WAY E
CITY-ST-ZIP ESTERO FL

TITLE VD ☒ Delete

NAME THOMAS, JACK
STREET ADDRESS 4541 CANDLESTICK COURT
CITY-ST-ZIP ESTERO FL

TITLE D ☐ Delete

NAME ALSTAD, RICHARD
STREET ADDRESS 4600 SLASH PINE WAY
CITY-ST-ZIP ESTERO FL 33928

TITLE S ☒ Delete

NAME WILLIAMS, DARLENE
STREET ADDRESS 4700 WASHINGTON WAY
CITY-ST-ZIP ESTERO FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT ☒ Change ☐ Addition

NAME CLIFFORD OLSON
STREET ADDRESS 4670 LIBERTY LN W.
CITY-ST-ZIP ESTERO FL 33928

TITLE VPD ☐ Change ☒ Addition

NAME STANLEY KNOLL
STREET ADDRESS 4620 LAFAYETTE LANE E
CITY-ST-ZIP ESTERO FL 33928

TITLE DIR. ☐ Change ☒ Addition

NAME PATRICIA NOLANDER
STREET ADDRESS 4500 SAWMILL DR.
CITY-ST-ZIP ESTERO FL 33928

TITLE DIR. ☐ Change ☒ Addition

NAME JOHN CLEGG, JR.
STREET ADDRESS 4691 LIBERTY LN W.
CITY-ST-ZIP ESTERO FL 33928

TITLE ☐ Change ☐ Addition

NAME SEC. GEORGIA JANE GATES
STREET ADDRESS 20131 COBBLESTONE COURT
CITY-ST-ZIP ESTERO FL 33928

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Norlene Armstrong
NORLENE ARMSTRONG 1/18/00 941-495-2543

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90002 036 ****61.25



DO NOT WRITE IN THIS SPACE