

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F33728

1. Entity Name

SUNNY GROVE PARK, INC.

Principal Place of Business

3401 CORALBERRY LANE
ESTERO FL 33928

Mailing Address

3401 CORALBERRY LANE
ESTERO FL 33928-2850

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

MCCLURE, ROBERT
500 FIFTH AVENUE SO.
STE 509
NAPLES FL 34102

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MANUTES, GEORGE	
STREET ADDRESS	3541 LYCHEE LN	
CITY-ST-ZIP	ESTERO, FL 00000 33928	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BEACH, MARGE	
STREET ADDRESS	3560 GRAPEFRUIT LN	
CITY-ST-ZIP	ESTERO, FL 00000 33928	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BISHOP, PHILLIP	
STREET ADDRESS	3480 DATE PALM LANE	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	PD	<input type="checkbox"/> Delete
NAME	WOOLDRIDGE, JAMES	
STREET ADDRESS	3510 LYCHEE LANE	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	D	<input type="checkbox"/> Delete
NAME	JOHNSON, CHARLES	
STREET ADDRESS	3599 LYCHEE LANE	
CITY-ST-ZIP	ESTERO FL	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MEHLING, WILLIAM	
STREET ADDRESS	3421 DATE PALM LANE	
CITY-ST-ZIP	ESTERO FL 33928	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BITLEY, GORDON	
STREET ADDRESS	3530 Grapefruit Lane	
CITY-ST-ZIP	Estero, FL 33928	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRANDT, MARVIN	
STREET ADDRESS	3420 Coralberry Lane	
CITY-ST-ZIP	Estero, FL 33928	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAIN, DOUG	
STREET ADDRESS	3410 Lychee Lane	
CITY-ST-ZIP	Estero, FL 33928	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOOLDRIDGE, JAMES	
STREET ADDRESS	3510 Lychee Lane	
CITY-ST-ZIP	Estero, FL 33928	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CODDINGTON, BARBARA	
STREET ADDRESS	3530 Date Palm Lane	
CITY-ST-ZIP	Estero, FL 33928	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLLOPETER, VIOLET	
STREET ADDRESS	3480 Lychee Lane	
CITY-ST-ZIP	Estero, FL 33928	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

Date

Daytime Phone #

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90011 003 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2901531**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E034 (9/99)