2000 UNIFORM BUSINESS REPORT (UBR)

May 30, 2000 8:00 am Secretary of State **DOCUMENT # N09452** 1. Entity Name SUMMERLIN WOODS CONDOMINIUM ASSOCIATION, INC. 05-30-2000 90041 021 ****61.25 Principal Place of Business Mailing Address 8695 COLLEGE PKWY. STE 348 8695 COLLEGE PKWY, STE 348 FT. MYERS FL 33919-5802 FT. MYERS FL 33919 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-2644279 Not Applicable Źip Country Country \$8.75 Additional 5. Certificate of Status Desired 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) ADAMS JOSEPH E ESQ BECKER POLIAKOFF PA 13515 BELLTOWER DRIVE SUITE 101 Zip Code City FL 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 $\frac{1}{2} = 0$, $i_1 = 0$, $i_2 = 0$, $i_3 = 0$, $i_4 =$ (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW: \$5.00** May Be Trust Fund Contribution. П Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. 🗶 Change ☐ Addition ☐ Delete TITLE ALISXANORO, ALISX NAME ALEXANDRO, ALEX 8695 COLLISCE PEWY, STE 348 STREET ADDRESS STREET ADDRESS 8695 COLLEGE PKWY, STE 348 CITY-ST-ZIP CITY-ST-ZIP MYIFAS FL 38919 FT. MYERS FL 33907 **Change** ☐ Addition SD TITLE □ Delete TITLE SARGBANT, LAURA NAME NAME SARGEANT, LAURA 8695 COLLIEGE PEWY, STIE 348 STREET ADDRESS STREET ADDRESS 8695 COLLEGE PKWY, STE 348 CITY-ST-ZIP T. MYERS, FL 33919 CITY-ST-ZIE FT. MYERS FL 33907 Change ☐ Addition VP0 TITLE TITLE □ Delete RINGHER, DOROTHY NAME RINGLIER, DOROTHY NAME 8695 COLLISCE DEWY STE 348 STREET ADDRESS STREET ADDRESS 8695 COLLEGE PKWY, STE 348 CITY-ST-ZIP CITY-ST-ZIP FT. MYERS, FL 33919 FT. MYERS FL 33907 Change Addition A TITLE PD Delete Delete TITLE JOSEPH COMPARITTO NAME NAME ANGLAVAR, DUANE 8695 COLLIEGIE PKWY STIE 348 STREET ADDRESS STREET ADDRESS 8695 COLLEGE PKWY, STE 348 CITY-ST-ZIP FT. MYERS FL 38919 CITY-ST-ZIP FT. MYERS FL 33907 Change Addition 🂢 X Delete TITLE ANTHONY DIGIOUANNI NAME NAME DESOTO, ROBERT 8695 COLLEGE PENY STE 348 STREET ADDRESS STREET ADDRESS 8695 COLLEGE PKWY, STE 348 CITY-ST-ZIP CITY-ST-ZIP MYIERS FL 33919 FT. MYERS FL 33907 Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

FILED

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Phone &

changed, or on an attachment with an address, with all other like empowered