

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N10491

FILED  
Mar 21, 2002 8:00 AM  
Secretary of State

Entity Name: TANGLEWOOD VILLAS OF LELY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O R. & P. MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

C/O R. & P. MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

**New Mailing Address:**

FEI Number: 59-2629753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

R AND P MANAGEMENT ASS  
265 AIRPORT ROAD SOUTH  
NAPLES, FL 34104    US

**Name and Address of New Registered Agent:**

R & P PROPERTY M ANAGEMENT  
265 AIRPORT ROAD SOUTH  
NAPLES, FL 34104    US

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: GLENN CARROLL

03/21/2002

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD      ( ) Delete  
Name: DRUGAN, HAL  
Address: 440 ST. ANDREWS BLVD  
City-St-Zip: NAPLES, FL

Title: TD      ( ) Delete  
Name: RUSSELL, BENSON  
Address: 456 ST. ANDREW BLVD.  
City-St-Zip: NAPLES, FL 34113

Title: S      ( ) Delete  
Name: DUDLEY CHISM,  
Address: 106 QUAIL HOLLOW CT  
City-St-Zip: NAPLES, FL

Title: D      ( ) Delete  
Name: WHITE, KATHERINE  
Address: 104 QUAIL HOLLOW CT  
City-St-Zip: NAPLES, FL 34113

Title: P      ( ) Delete  
Name: HAJDUCKY, ANDREW  
Address: 108 QUAIL HOLLOW COURT  
City-St-Zip: NAPLES, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD      (X) Change ( ) Addition  
Name: AIELLO, AL  
Address: 101 QUAIL HOLLOW COURT  
City-St-Zip: NAPLES, FL 34113

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW HAJDUCKY

P

03/21/2002

Electronic Signature of Signing Officer or Director

Date