

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90057 028 ****61.25

DOCUMENT # N22435

1. Entity Name

THE VILLAGES AT COUNTRY CREEK I HOMEOWNERS ASSOC

Principal Place of Business

Mailing Address

21131 COUNTRY CREEK DRIVE
 ESTERO FL 33928
 US

10060 AMBERWOOD RD.
 UNIT 3
 FT. MYERS FL 33913-8522
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0040528

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

SARVER, HELEN J.
10060 AMBERWOOD RD
UNIT 3
ESTERO FL 33928

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	JOLIE, ROLAND	20910 BLACKSMITH FORGE	ESTERO FL				
S	MORAMARCO, NICHOLAS	20887 BLACKSMITH FORGE	ESTERO FL 33928				
VPD	METZ, MARY	20854 ANDIRON PLACE	ESTERO FL				
D	DODUNSKI, ROBERT	21079 BUTCHERS HOLLER	ESTERO FL 33928				
TD	BRUCH, GEORGE	21030 BUTCHER'S HOLLER	ESTERO FL				

I, 2. 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: *S. Roland* **SIGNATURE REQUIRED** 1/11/00 495-0736
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)