

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91292 010 \*\*\*\*61.25

**DOCUMENT # N27002**

1. Entity Name

**SOUTHSHORE AT FOUNTAIN LAKES NEIGHBORHOOD ASSOCI**

Principal Place of Business

22700 TAMiami TRAIL  
 ESTERO FL 33928

Mailing Address

22201 FOUNTAIN LAKES BLVD STE 1  
 ESTERO FL 33928

2. Principal Place of Business

3. Mailing Address

P.O. Box 870

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ESTERO FL

4. FEI Number

65-0126045

Applied For

Not Applicable

Zip

Country

Zip

Country

33928-0870

USA

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

DEBOEST, RICHARD D.  
 1415 HENDRY STREET  
 FORT MYERS FL 33901

Name

PAULETTE ANDERS

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

17830 S. TAMiami TR #6

City

FORT MYERS

FL

Zip Code

33908

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

*Paulette Anders*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/30/01

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 PD ☒ Delete  
 NAME ENGELSMA, DANIEL W.  
 STREET ADDRESS 4210 W OLD SHAKOPEE ROAD  
 CITY-ST-ZIP MINNEAPOLIS MN 55437

TITLE PD ☒ Change ☒ Addition  
 NAME ROBERT OKLAPEK  
 STREET ADDRESS 22798 FOUNTAIN LAKES BLVD  
 CITY-ST-ZIP ESTERO FL 33928

TITLE STD ☒ Delete  
 NAME DAHLBERG, BURTON F.  
 STREET ADDRESS 4210 W OLD SHAKOPEE RD  
 CITY-ST-ZIP MINNEAPOLIS MN 55437

TITLE VD ☐ Change ☒ Addition  
 NAME JAMES JUDEK  
 STREET ADDRESS 22733 FOUNTAIN LAKES BLVD.  
 CITY-ST-ZIP ESTERO FL 33928

TITLE VD ☐ Delete  
 NAME NEWELL, SHARON  
 STREET ADDRESS 22739 CAROLINE WAY  
 CITY-ST-ZIP ESTERO FL

TITLE TD ☒ Change ☐ Addition  
 NAME SHARON NEWELL  
 STREET ADDRESS 22739 CAROLINE WAY  
 CITY-ST-ZIP ESTERO FL 33928

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: *Sharon A. Newell* SHARON A. NEWELL 4/30/01 (941) 498-6299

CR2E037 (10/00)