

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 29, 2001 08:00 AM**
Secretary of State**DOCUMENT # N46526****1. Entity Name**
SPANISH WELLS GOLF CONDOMINIUMS ASSOCIATION, INC.**Principal Place of Business**
C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD. S
NAPLES FL 341043518 US**Mailing Address**
C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD. S
NAPLES FL 341043518 US**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

4. FEI Number
65-0303292Applied For
Not Applicable**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**7. Name and Address of New Registered Agent**R & P PROPERTY MGMT
265 AIRPORT RD SNAPLES FL
34104Name
CARROLL GLENNStreet Address (P.O. Box Number is Not Acceptable)
265 AIRPORT RD SCity FL Zip Code
NAPLES 34104**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 **GLENN CARROLL****04/29/2001**

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

(NOTE: Registered Agent signature required when reinstalling)

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	D	☐ Delete
NAME	VERDERBEN CLIFFORD	
STREET ADDRESS	9851 COSTA MESA LN. #305	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	DVP	☐ Delete
NAME	BAILEY FRED	
STREET ADDRESS	9855 COSTAMESA LN. #402	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	DP	☐ Delete
NAME	SCHRATWIESER TOM	
STREET ADDRESS	9860 COSTA MESA LANE #504	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	DVP	☐ Delete
NAME	MUNRO JAMES	
STREET ADDRESS	9856 COSTA MESA LN. #604	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	DST	☐ Delete
NAME	MURPHY WILLIAM	
STREET ADDRESS	9850 COSTA MESA LN. #708	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DVP	☒ Change ☐ Addition
NAME	VERDERBEN CLIFFORD	
STREET ADDRESS	9851 COSTA MESA LN. #305	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☒ Change ☐ Addition
NAME	KOLAR BUD	
STREET ADDRESS	9856 COSTA MESA LN. #603	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE		☐ Change ☐ Addition
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)(f), 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:**

TOM SCHRATWIESER

DP

04/29/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day-time Phone #

CR2E037 (11/00)