2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9400002676 1. Entity Name



FILED
Mar 14, 2003 8:00 am
Secretary of State
03-14-2003 90049 023 ****61.25

WEDGEWOOD OF SANIBEL CONDOMINIUM ASSOCIATION, IN C.					03-14-2003 90049 023 *** 01.23					
Principal Pla	ice of Business	Mailing Address			-					
1661 ESTERO	i i	P.O. BOX 6017			Ì					
#27 FT. MYERS FL 33932 FT. MYERS BCH FL 33931										
TI. WILIO					13000000000	111 111 11 11 111 10 111	 1 001 10 02 10 03 1003 1003	12010 OHH 1881		
2. Principal	Place of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		11	☐ CHECK HERE IF MAKING CHANGES					
F M	yers Bat Fi	City & State			4. FEI Number 6	5-0652895	J 	Applied For Not Applicable]	
330:	31 Country	Zip	Country		5. Certificate of S		S8.75 Ac Fee Requir]	
	6. Name and Address of Current f	Registered Agent	Nam		7. Name and Add	ress of New Re	gistered Agent]	
DG SUIT	OR & ASSOCIATES								_	
	TERO BLVD		Street Address			(P.O. Box Number is Not Acceptable)				
P.O. BOX 6017			10	<u> </u>	versl	<u> </u>	30-15		1	
FT. MYEI	RS FL 33932		City	<u>0 W</u>	VERSC	Ane	FL Zip Co	de	1	
8. The above	e named entity submits this statement for	the purpose of changing its re	aistored office	0.04.50.51.55	and amount as books in	the Otate of Ele-	. —		1	
the obliga	tions of registered agent	the purpose of changing its re	egistered offici	e or registere	ed agent, or both, in	the State of Flor	ida. Tam familiar with	, and accept		
						7	1- 1	>		
SIGNATURE	Signature, typed or printed name of registered agent as	nd title if applicable. (NOTE: F	Registered Agent si	oneture required :	when reinstating)		134/05			
		(1012)	logistoros Agont si	griatoro required	when remotating)	·		<u> </u>	-	
	FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Make Check Payable to Florida Department of State					
10.	OFFICERS AND DIR	······································	11.		DDITIONS/CHANG	ES TO OFFICER	S AND DIRECTORS II	N 10	Ì	
TITLE	PD CHENEY MULANA	Delete	TITLE $ ho_0$	Roc	E LUM	1年1	Change	☐ Addition	٤	
NAME STREET ADDRESS	CHENEY, WILLIAM 3135 W. GULF DR. #201		NAME STREET ADDRES	。 3 1 3	i w. Gu	11 DR	#305		140	
CITY-ST-ZIP	SANIBEL FL 33957		CITY-ST-ZIP	" SAV	ribel I	S1., F	7 339	57	700	
TITLE	TD	□ Delete	TITLE			<u>'</u>	☐ Change	☐ Addition	200	
NAME	PLATT, STEVE		NAME				onlingo	L Addition	Ç	
	3127 W GULF DR 102		STREET ADDRES						l	
CITY-ST-ZIP	SANDEL FL 33837		· CITY-ST-ZIP-				was the control			
TITLE NAME	DT Cheney, William	Delete	TITLE NAME			•	☐ Change	☐ Addition	l	
STREET ADDRESS	3135 W GULD DR UNIT 201		STREET ADDRES	is l					l	
CITY-ST-ZIP	SANIBEL FL 33957		CITY-ST-ZIP						l	
TITLE	SD	☐ Delete	TITLE				☐ Change	Addition	ĺ	
NAME	PLAT, STEVE		NAME				_ •		İ	
STREET ADDRESS CITY-ST-ZIP	3135 W. GULF DR. #102		STREET ADDRES	SS			•	ı	ŀ	
TITLE	SANIBEL FL 33957						—			
NAME	LEIS, DR. ALBERT	☐ Delete	TITLE NAME				☐ Change	☐ Addition		
STREET ADDRESS	10906 PAW PAW LANE		STREET ADDRES	s						
CITY-ST-ZIP	GOSHEN KY 40026		CITY-ST-ZIP							
TITLE		□ Delete	TITLE				☐ Change	☐ Addition		
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP	·		STREET ADDRES	S						
	certify that the information supplied with the	nie filing doge not qualify for th	CITY-ST-ZIP	stated in Sec.	tion 110 07(0)(), 51	wind Orac and a second				
- Cooy C	record and the internation supplied with the	no ming does not quality for th	e exemption s	ialeo in Sec	uon 119.07(3)(1), Ho	rida Statutes, i fi	inther certify that the i	ntormation L		

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:

502 228-4627