

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29125

1. Entity Name

REGENT PARK VILLAS II ASSOCIATION, INC.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90108 037 \*\*\*\*61.25

Principal Place of Business

Mailing Address

~~10770 QUEEN ANNE LANE~~  
~~NAPLES FL 33942~~  
 US

~~P.O. BOX 7105~~  
~~NAPLES FL 34101-7105~~  
 US

2. Principal Place of Business

3. Mailing Address

2073 J+C BLVD.

P.O. Box 110339

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
 Naples, FL.

City & State  
 Naples, FL.

Zip  
 34109

Country  
 US

Zip  
 34108

Country  
 US

4. FEI Number

65-0095109

Applied For

Not Applicable

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

KUETER, BEVERLY  
 C/O SUNBURST MGMT CORP  
~~2079 J & C BLVD~~  
 NAPLES FL 34109

Name

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

2073 J+C BLVD.

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 ~~DS~~ ☐ Delete  
 NAME GEHRING, DAVE  
 STREET ADDRESS 10742 HENRY CT  
 CITY-ST-ZIP NAPLES FL

TITLE D,P ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ~~DVP~~ ☒ Delete  
 NAME BUTTON, RICHARD  
 STREET ADDRESS 3366 ERICK LANE DRIVE  
 CITY-ST-ZIP NAPLES FL

TITLE D,VP ☐ Change ☒ Addition  
 NAME Kingsley, John  
 STREET ADDRESS 10730 Henry Ct.  
 CITY-ST-ZIP NAPLES, FL.

TITLE ~~DS~~ ☒ Delete  
 NAME O'NEILL, DON  
 STREET ADDRESS 10800 KING GEORGE LN  
 CITY-ST-ZIP NAPLES FL

TITLE D ☐ Change ☒ Addition  
 NAME SIMON, JAMES  
 STREET ADDRESS 10760 Queen Anne Ln.  
 CITY-ST-ZIP NAPLES, FL.

TITLE ~~D~~ ☐ Delete  
 NAME BOWEN, PAULINE  
 STREET ADDRESS 3364 ERICK LAKE DR  
 CITY-ST-ZIP NAPLES FL

TITLE D,T ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ~~DR~~ ☐ Delete  
 NAME KERR, RUTH  
 STREET ADDRESS 3326 ERICK LAKE DR  
 CITY-ST-ZIP NAPLES FL

TITLE D,S ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ 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:

*Pauline Bowen*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 12, 2000  
 Date Daytime Phone #

CR2E037 (9/99)