

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

2003-000

0051345

DOCUMENT # N33925

1. Entity Name

OAKMONT VILLAGE PROPERTY OWNERS ASSOCIATION, INC



FILED

03 MAY -1 AM 11:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

6213 A PRESIDENTIAL CT  
FT MYERS FL 33919  
US

Mailing Address

6213 A PRESIDENTIAL CT  
FT MYERS FL 33919  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0162286

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

HENKE, CAROL J  
C/O HENKE PROPERTY MGT INC  
6213-E PRESIDENTIAL CT  
FT MYERS FL 33919

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TSD	<input type="checkbox"/> Delete
NAME	APPLETON, SHERBURNE	
STREET ADDRESS	5885 TRAILWINDS DR #725	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MYERS, JIM	
STREET ADDRESS	5945 TRAILWINDS DR. #1021	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MYERS, JIM	
STREET ADDRESS	5945 TRAILWINDS DR #1021	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	D	<input type="checkbox"/> Delete
NAME	FULLER, MELVIN	
STREET ADDRESS	5825 TRAILWINDS DR. #421	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	NASH, FRED	
STREET ADDRESS	5845 TRAILWINDS DR. #523	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LEAKE, ROBERT	
STREET ADDRESS	5805 TRAILWINDS DR. #313	
CITY-ST-ZIP	FORT MYERS FL 33907	

TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	400017842364	
CITY-ST-ZIP	05/01/03--01077--002 **61.25	
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gervase, Pete	
STREET ADDRESS	5965 Trailwinds Dr # 1114	
CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Glidden, George	
STREET ADDRESS	5865 Trailwinds Drive # 604	
CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: PETE GERVASE 4-28-2003 239-481-7150

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E037 (10/02)