

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90132 001 ***900.00

0606891 AV

DOCUMENT # 417502

1. Entity Name

FLORIDA LIFESTYLE MANAGEMENT COMPANY

Principal Place of Business

**1904 CLUBHOUSE DR
SUN CITY CENTER FL 33573**

Mailing Address

**24301 WALDEN CENTER DR
BONITA SPRINGS FL 34134**

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

59-1505694

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

HASTINGS, VIVIEN

**24301 WALDEN CENTER DR
BONITA SPRINGS FL 34134**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SVP** ☐ Delete
NAME **FLINN, MILTON G**
STREET ADDRESS **24301 WALDEN CENTER DR**
CITY-ST-ZIP **BONITA SPRINGS FL 34-1347**

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

TITLE **V** ☐ Delete
NAME **HUMES, JACKIE**
STREET ADDRESS **24301 WALDEN CENTER DRIVE**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

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

TITLE **DSVT** ☐ Delete
NAME **DIETZ, JAMES P**
STREET ADDRESS **24301 WALDEN CENTER DR**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

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

TITLE **C** ☐ Delete
NAME **HOFFMAN, ALFRED JR.**
STREET ADDRESS **24301 WALDEN CENTER DR**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

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

TITLE **DP** ☐ Delete
NAME **STARKEY, JERRY L**
STREET ADDRESS **24301 WALDEN CENTER DR**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

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

TITLE **VS** ☐ Delete
NAME **HASTINGS, VIVIEN**
STREET ADDRESS **24301 WALDEN CENTER DR.**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Vivien Hastings, Secretary

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/02 (941) 947-2600

Date

Daytime Phone #

CR2E034 (9/01)

Attachment
15078

**ATTACHMENT TO 2002 UNIFORM BUSINESS REPORT
FOR
FLORIDA 34134 LIFESTYLE MANAGEMENT COMPANY
DOCUMENT # 417502**

12. ADDITIONS TO OFFICERS AND DIRECTORS IN 11:

Title: V
Name: James D. Cullen
Street Address: 24301 Walden Center Drive
City, State, Zip: Bonita Springs, Florida 34134

Title: V
Name: Steven C. Adelman
Street Address: 24301 Walden Center Drive
City, State, Zip: Bonita Springs, Florida 34134

Title: AS
Name: Sylvia Keith
Street Address: 24301 Walden Center Drive
City, State, Zip: Bonita Springs, Florida 34134