

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2001 8:00 am
Secretary of State

05-29-2001 90002 039 ****61.25

DOCUMENT # 703561

1. Entity Name

GEORGE TOWN OWNERS ASSOCIATION, INC.

Principal Place of Business

10 GEORGE TOWN
 FORT MYERS FL 33919
 US

Mailing Address

10 GEORGE TOWN
 FORT MYERS FL 33919
 US

000412



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

24 George Town
 Suite, Apt. #, etc.

3. Mailing Address

24 George Town
 Suite, Apt. #, etc.

City & State

Fort Myers

City & State

Fort Myers

4. FEI Number

59-2355675

Applied For

Not Applicable

Zip

FL

Country

33919

Zip

FL

Country

33919

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUSSEY, JERRY
 10 GEORGE TOWN
 FT. MYERS FL 33919

7. Name and Address of New Registered Agent

Name: Deirdre S. Baker
 Street Address (P.O. Box Number is Not Acceptable):
 24 George town
 City: Fort Myers FL Zip Code: 33919

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

Deirdre S Baker

(NOT Registered Agent signature required when reinstating)

DATE

4/1/00

**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

TITLE	<input checked="" type="checkbox"/> Delete
NAME	ENGVALSON, KINLEY
STREET ADDRESS	31 GEORGE TOWN
CITY-ST-ZIP	FT MYERS FL
TITLE	<input checked="" type="checkbox"/> Delete
NAME	D LENICK, EDWARD
STREET ADDRESS	7 GEORGE TOWN
CITY-ST-ZIP	FT MYERS FL 33919
TITLE	<input type="checkbox"/> Delete
NAME	T HUSSEY, JERRY
STREET ADDRESS	10 GEORGE TOWN
CITY-ST-ZIP	FT MYERS FL 33919
TITLE	<input type="checkbox"/> Delete
NAME	ORR, JAMES
STREET ADDRESS	21 GEORGE TOWN
CITY-ST-ZIP	FT MYERS FL
TITLE	<input type="checkbox"/> Delete
NAME	S PROSSEN, PEGGY
STREET ADDRESS	17 GEORGE TOWN
CITY-ST-ZIP	FT MYERS FL 33919
TITLE	<input checked="" type="checkbox"/> Delete
NAME	D MATHESON, ROBERT
STREET ADDRESS	10140 MCGREGOR BLVD
CITY-ST-ZIP	FT. MYERS FL 33919

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert Farnsworth	
STREET ADDRESS	10160 Mc Gregor Blvd.	
CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Deirdre S Baker	
STREET ADDRESS	24 George town	
CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE	Director	<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:

Deirdre S. Baker, Treasurer 4/1/01

CR2E037 (10/00)