

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

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91480 022 ****61.25

DOCUMENT # 707258

1. Entity Name
ISLES COLONY CONDOMINIUM APTS NO. II, INC.



Principal Place of Business
**1700 JAMAICA WAY
PUNTA GORDA FL 33950**

Mailing Address
**P.O. BOX 510463
PUNTA GORDA FL 33950**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1566896**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**WHITE, ALAN
15510 BURNT STORE ROAD
PUNTA GORDA FL 33955**

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 NAME STREET ADDRESS CITY-ST-ZIP	PD STIEHL, CARL 2030 JAMAICA WAY PUNTA GORDA FL 33950	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BLISS, BONNIE 1700 JAMAICA WAY #102 PUNTA GORDA FL 33950	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, LEN 1700 JAMAICA WAY #111 PUNTA GORDA FL 33950	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BROWN, BOB 1448 GREBE DRIVE PUNTA GORDA FL 33950	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAVANE, VIRGINIA 1700 JAMAICA WAY #112 PUNTA GORDA FL 33955	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD George Lord 1700 Jamaica Way #101 Punta Gorda FL 33951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Len Renda. 1700 Jamaica way #112 Punta Gorda, FL 33951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

CR2E037 (10/02)