

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

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90152 026 ****61.25

DOCUMENT # 718983

1. Entity Name

GOLFWOOD CONDOMINIUM NO. 2, INC.



Principal Place of Business

**361 WESTPARK RD.
LEHIGH ACRES FL 33972
US**

Mailing Address

**PO BOX 655
LEHIGH ACRES FL 33970-0655
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1446734**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FREATHY, RALPH E
361 WESTPARK RD.
LEHIGH ACRES FL 33972**

7. Name and Address of New Registered Agent

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 **Ralph Freathy**

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

(NOTE: Registered Agent signature required when reinstating)

February 17, 2003

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

TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	SNIPES, JOE	
STREET ADDRESS	353 RICHLAND RD	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	FRENCH, CARL	
STREET ADDRESS	349 RICHLAND RD	
CITY-ST-ZIP	LEIGH ACRES FL 33972	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RUSSELL, ROBERT	
STREET ADDRESS	369 WESTPARK RD	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	FREATHY, RALPH	
STREET ADDRESS	361 WESTPARK RD	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	KELLEY, EDWIN	
STREET ADDRESS	311 MAYCREAST RD	
CITY-ST-ZIP	LEHIGH ACRES FL 33972	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	George Switzer II	
STREET ADDRESS	301 MayCrest Rd.	
CITY-ST-ZIP	Lehigh Acres FL 33972	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Henry, Glenroy	
STREET ADDRESS	353 Richland Rd.	
CITY-ST-ZIP	Lehigh Acres FL 33972	
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: **Ralph Freathy**

SIGNATURE

February 17, 03 239-369-8006

CR2E037 (10/02)