

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 741204

1. Entity Name

EL RIO CONDOMINIUM BUILDING NO. 8, INC.

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90009 036 ****61.25

Principal Place of Business
4840 GOLF CLUB COURT #8
STE. 8
NORTH FORT MYERS FL 33903
US

Mailing Address
4840 GOLF CLUB COURT #8
STE. 8
NORTH FORT MYERS FL 33903-4614
US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number
59-2361387

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
FORD, BILLIE
4840 GOLF CLUB COURT STE 8
NORTH FORT MYERS FL 33903

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.

SIGNATURE Billie Ford
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
Department of State

10. OFFICERS AND DIRECTORS

T FORD, BILLIE 4840 GOLF CLUB DIVE STE 8 NORTH FORT MYERS FL	☐ Delete
D RICE, DORIS 4840 GOLF CLUB CT. #3 N. FT. MYERS FL	☐ Delete
D MARTIN, LOU ANN 4840 GOLF CLUB COURT #5 NORTH FORT MYERS FL 33903	☐ Delete
SD BOON, LAVERNE 4840 GOLF CLUB COURT #1 NORTH FORT MYERS FL 33903	☐ Delete
VP BENETATOS, MIHCAEL 4840 GOLF CLUB COURT #6 NORTH FORT MYERS FL 33903	☒ Delete
PD BENETATOS, MICHAEL 4840 GOLF CLUB COURT #6 NORTH FORT MYERS FL 33903	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

SAME AS LEFT
NOW PRESIDENT & DIRECTOR

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: Billie Ford March 13, 2000 941-925-4509
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)