

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

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90018 006 ****61.25

DOCUMENT # 741204

1. Entity Name

EL RIO CONDOMINIUM BUILDING NO. 8, INC.



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
US**

2. Principal Place of Business

4840 GOLF CLUB CT #2

3. Mailing Address

4840 GOLF CLUB CT #2

Suite, Apt. #, etc.

STE 2

Suite, Apt. #, etc.

STE 2

City & State

N FT MYERS FL 33903

City & State

N. FT MYERS FL

Zip

33903

Country

US

Zip

33903

Country

US



☒ CHECK HERE IF MAKING CHANGES

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

**TIPTON, VIOLA
4840 GOLF CLUB COURT STE 2
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Viola Tipton Treasurer

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/03

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 **T** ☒ Delete
NAME **FORD, BILLIE**
STREET ADDRESS **4840 GOLF CLUB DRIVE STE 8**
CITY-ST-ZIP **NORTH FORT MYERS FL**

TITLE **S** ☒ Change ☐ Addition
NAME **FORD, BILLIE**
STREET ADDRESS **4840 GOLF CLUB CT #**
CITY-ST-ZIP **N. FT. MYERS FL 33903**

TITLE **VD** ☒ Delete
NAME **MARTIN, LOUANN**
STREET ADDRESS **4840 GOLF CLUB DRIVE #5**
CITY-ST-ZIP **FORT MYERS FL 33903**

TITLE **VP** ☐ Change ☒ Addition
NAME **Betty Sheets**
STREET ADDRESS **4840 GOLF CLUB CT 3**
CITY-ST-ZIP **N FT. MYERS FL 33903**

TITLE **STS** ☒ Delete
NAME **FORD, BILLIE**
STREET ADDRESS **4840 GOLF CLUB DRIVE #8**
CITY-ST-ZIP **NORTH FORT MYERS FL 33903**

TITLE **MB** ☐ Change ☒ Addition
NAME **PATRICA ADAMS**
STREET ADDRESS **4840 GOLF CLUB CT 11**
CITY-ST-ZIP **N FT. MYERS FL 33903**

TITLE **T** ☐ Delete
NAME **TIPTON, VIOLA**
STREET ADDRESS **4840 GOLF CLUB CT #2**
CITY-ST-ZIP **NORTH FORT MYERS FL 33903**

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

TITLE **MB** ☐ Delete
NAME **PARRICH, DORIS**
STREET ADDRESS **4840 GOLF CLUB CT # 4D**
CITY-ST-ZIP **FORT MYERS FL 33903**

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

TITLE **PD** ☐ Delete
NAME **BENETATOS, MICHAEL**
STREET ADDRESS **4840 GOLF CLUB COURT #6**
CITY-ST-ZIP **NORTH FORT MYERS FL 33903**

TITLE ☐ Change ☐ 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: Viola Tipton **REQUIRED** Viola Tipton 1/7/03 239-997-2575

CR2E037 (10/02)