2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 11, 2002 8:00 am § DOCUMENT # **746321** Secretary of State 1. Entity Name SPANISH WELLS HOMEOWNERS ASSOCIATION, INC. 03-11-2002 90070 039 ****61.25 Principal Place of Business Mailing Address 7820 TREASURE CAY LN SWHA.INC.UNIT 1 **BONITA SPRINGS FL 34135** P.O. BOX 219 BONITA SPRINGS FL 34133 US 2. Principal Place of Business 28379 LAS PALMAS 3. Mailing Address CIR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For FL 59-2022320 SPRIN45 BONITA Not Applicable ^{Zip} 34/35 Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LETTS, HRTHUR Street Address (P.O. Box Number is Not Acceptable) SEDOTA, DONALD 9820 TREASURE CAY LANE 28379 LAS PALMAS CIRCLE **BONITA SPRINGS FL 34135** 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 ered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01) TITI F TITI F Change ☐ Delete LETTS, ARTHUR LYONS, WILLIAM NAME NAME 28379 LAS PALMAS CIRCLE STREET ADDRESS 9952 TREASURE CAY LANE STREET ADDRESS BONITA SPRINGS, FL 34/35. **BONITA SPRINGS FL 34135** CITY-ST-ZIP CITY-ST-ZIP TD Change Change X Delete ☐ Addition TITLE TITLE LYONS, WILLIAM 9952 TREASURE CAY LN. WEISENBERG, RUSS NAME NAME 9908 TREASURE CAY LANE STREET ADDRESS STREET ADDRESS BONITA SPRINGS. FL 34135 CITY-ST-7IP **BONITA SPRINGS FL 34135** CITY-ST-ZIP PD Change. 💢 Change. TITLE ☐.Delete _ . . TITLE SEDOTA, DONALD SEDOTA, DONALD NAME NAME 9820 TREASURE CAY LN. 9820 TREASURE CAY LN STREET ADDRESS STREET ADDRESS 34/35 BONITA SPRINGS. CITY-ST-ZIP **BONITA SPRINGS FL 34135** CITY-ST-ZIP TITLE TITLE ■ Delete HODGES, DON NAME NAME 28344 TASCA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34135** CITY-ST-ZIP TITLE ☐ Delete Change Addition TITLE MARJIE GEORGE, JAN NAME NAME ALT MAN, 9904 TREASURE CAY LN. 9904 WHITE SANDS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BONITA SPRINGS, -FL CITY-ST-7IP **BONITA SPRINGS FL 34135**

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 tostee 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 appreciate the empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

SKIMEL, FRED

28383 LAS PALMAS

BONITA SPRINGS FL 34135

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

Addition