

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90360 032 ****61.25

DOCUMENT # 755893

1. Entity Name

PALM RIVER HOMEOWNERS AND CIVIC ASSOCIATION, INC

Principal Place of Business

Mailing Address

PO BOX 110002
 NAPLES FL 34108-0101
 US

PO BOX 110002
 NAPLES FL 34108-0002
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2167714

Applied For

Not Applicable

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

BELT, JOHN F
130 FAIRWAY CIRCLE
NAPLES FL 34110

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
 NAME BELT, JEAN R.
 STREET ADDRESS 130 FAIRWAY CIRCLE
 CITY-ST-ZIP NAPLES FL 34110-1116

TITLE PD ☒ Change ☒ Addition
 NAME ~~HEALY, CHARLES~~
 STREET ADDRESS 663 CYPRESS WAY EAST
 CITY-ST-ZIP NAPLES FL 34110

TITLE VPD ☒ Delete
 NAME HEALY, CHARLES
 STREET ADDRESS 669 CYPRESS WAY EAST
 CITY-ST-ZIP NAPLES FL 34110

TITLE VPD ☒ Change ☒ Addition
 NAME BARNHILL, KEVIN
 STREET ADDRESS 593 CYPRESS WAY EAST
 CITY-ST-ZIP NAPLES FL 34110

TITLE DS ☐ Delete
 NAME MORRILL, JEAN A
 STREET ADDRESS 675 CYPRESS WAY EAST
 CITY-ST-ZIP NAPLES FL 34110

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

TITLE DT ☐ Delete
 NAME BELT, JOHN F
 STREET ADDRESS 130 FAIRWAY CIR
 CITY-ST-ZIP NAPLES FL 34110

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

John F. Belt
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-02 239 597 3499

Date

Daytime Phone #

CR2E037 (9/01)