

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90044 037 ****61.25

DOCUMENT # 756896

1. Entity Name

TAMAMI VILLAGE LOT OWNERS ASSOCIATION, INC.

Principal Place of Business

~~9021 ARBOR DRIVE~~
NORTH FORT MYERS FL 33903
US

Mailing Address

~~9021 ARBOR DRIVE~~
NORTH FORT MYERS FL 33903
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip
33903

Country
USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip
33903

Country
USA

9097 FLAMINGO CIRCLE

N. FORT MYERS, FL



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2351945

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHAMBERLAIN, STERLING L
9097 FLAMINGO CIRCLE
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

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

TITLE NAME	S AUSTIN, COLLEEN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	132 CELESTIAL WAY	
CITY-ST-ZIP	NORTH FORT MYERS FL 33903	
TITLE NAME	D THOMPSON, CHARLES	<input type="checkbox"/> Delete
STREET ADDRESS	9090 FLAMINGO CIRCLE	
CITY-ST-ZIP	NORTH FORT MYERS FL 33903	
TITLE NAME	VP KOFFMAN, ALEX	<input type="checkbox"/> Delete
STREET ADDRESS	198 HIBISCUS WAY	
CITY-ST-ZIP	NORTH FORT MYERS FL 33903	
TITLE NAME	D CLEAVER, FRANK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	9055 FLAMINGO CIRCLE	
CITY-ST-ZIP	N FT MYERS FL 33903	
TITLE NAME	T CROFT, VIRGINIA	<input type="checkbox"/> Delete
STREET ADDRESS	4 GALAXY WAY	
CITY-ST-ZIP	NORTH FORT MYERS FL 33903	
TITLE NAME	P CHAMBERLAIN, STERLING	<input type="checkbox"/> Delete
STREET ADDRESS	9021 ARBOR DRIVE	
CITY-ST-ZIP	NORTH FORT MYERS FL 33903	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	SECRETARY HALL, JOYCE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	246 CITRON WAY	
CITY-ST-ZIP	N. FORT MYERS, FL 33903	
TITLE NAME	CHARLES JONES	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	DIRECTOR JONES, CHARLES	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	36 G'ALAXY WAY	
CITY-ST-ZIP	N. FORT MYERS, FL 33903	
TITLE NAME	DIRECTOR ROSS, MAX	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	9014 ARBOR DR.	
CITY-ST-ZIP	N. FORT MYERS, FL 33903	
TITLE NAME	DIRECTOR AUSTIN, DAVE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	132 CELESTIAL WAY	
CITY-ST-ZIP	N. FORT MYERS, FL 33903	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *[Signature]* **2-11-02 941-995-4432**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)