

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757939

1. Entity Name

SPRING CREEK VILLAGE MOBILE HOME OWNERS ASSOCIATION

FILED  
Jan 29, 2001 8:00 am  
Secretary of State

01-29-2001 90004 044 \*\*\*\*61.25

Principal Place of Business

24647 SOUTH SEAS BLVD.  
BONITA SPRINGS FL 34134

Mailing Address

24647 SOUTH SEAS BLVD.  
BONITA SPRINGS FL 34134

2. Principal Place of Business

Suite, Apt. #, etc.  
24683 WINDWARD BLVD.

City & State  
BONITA SPRINGS, FL

Zip  
34134

Country  
USA

3. Mailing Address

Suite, Apt. #, etc.  
24683 WINDWARD BLVD.

City & State  
BONITA SPRINGS, FL

Zip  
34134

Country  
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2372299

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

BROWN, GARY  
4688 PAGO PAGO  
BONITA SPRINGS FL 34134

7. Name and Address of New Registered Agent

Name KELLY, DONALD  
Street Address (P.O. Box Number is Not Acceptable)  
24849 SOUTH SEAS BLVD.

City BONITA SPRINGS FL Zip Code 34134

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

(NOTE: Registered Agent signature required when reinstating)

DATE JAN. 12, 2001

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 PD  
NAME SCHAAD, JOSEPH  
STREET ADDRESS 24647 SOUTH SEAS BLVD.  
CITY-ST-ZIP BONITA SPRINGS FL 34134 ☒ Delete

TITLE DV  
NAME BROWN, GARY  
STREET ADDRESS 4688 PAGO PAGO  
CITY-ST-ZIP BONITA SPRINGS FL ☒ Delete

TITLE DT  
NAME EDWARDS, DAVID  
STREET ADDRESS 4692 PAGO PAGO  
CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Delete

TITLE D  
NAME GIBSON, JOHN  
STREET ADDRESS 24872 WINDWARD  
CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Delete

TITLE DCS  
NAME HIGGINS, ROSE  
STREET ADDRESS 24937 WINDWARD  
CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Delete

TITLE DCS  
NAME SMITH, EMMA  
STREET ADDRESS 24660 WINDWARD  
CITY-ST-ZIP BONITA SPRINGS FL 34134 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP  
NAME KELLY, DONALD  
STREET ADDRESS 24849 SOUTH SEAS BLVD.  
CITY-ST-ZIP BONITA SPRINGS, FL 34134 ☒ Change ☐ Addition

TITLE DV  
NAME GORBUTT, GORDON  
STREET ADDRESS 4705 MAIKAI  
CITY-ST-ZIP BONITA SPRINGS, FL 34134 ☒ Change ☐ Addition

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

TITLE DRS  
NAME GIDLEY, PHYLISS  
STREET ADDRESS 4709 KEIKANI  
CITY-ST-ZIP BONITA SPRINGS, FL 34134 ☒ Change ☐ Addition

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: DONALD KELLY REQUIRED *Donald Kelly* JAN 12, 2001  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 01/12/2001

CR2E037 (10/00)