

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 759121**

1. Entity Name

COACH LIGHT MANOR ASSOCIATION, INC.**FILED****Jun 17, 2002 8:00 am**
Secretary of State

05-23-2002 90072 034 ****61.25

93189



DO NOT WRITE IN THIS SPACE

Principal Place of Business

18050 S. TAMiami TRAIL
FT MYERS FL 33908

Mailing Address

18050 S. TAMiami TRAIL
FT MYERS FL 33908

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

59-2110212

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, RICHARD
18050 S TAMiami TR
#154
FT. MYERS FL 33908Name **DARREL HOADLEY**Street Address (P.O. Box Number is Not Acceptable)
**18050 S. TAMiami TR.
#57**City **FORT MYERS**

FL

Zip Code

33908

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

Darrel Hoadley **DARREL HOADLEY, PRESIDENT****4/30/02**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD**
NAME **HENNE, MARY R** ☒ Delete
STREET ADDRESS **18050 S TAMiami TR, #118**
CITY-ST-ZIP **FT MYERS FL 33908**TITLE **PD**
NAME **MARTIN, RICHARD** ☒ Delete
STREET ADDRESS **18050 S TAMiami TR, #154**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE **VD**
NAME **HOADLEY, DARREL** ☐ Delete
STREET ADDRESS **18050 S TAMiami TR #57**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE **S**
NAME **KISER, BETTY** ☐ Delete
STREET ADDRESS **18050 S TAMiami TR #99**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **TREASURER** ☐ Change ☒ Addition
NAME **PAT DRAV**
STREET ADDRESS **18050 S. TAMiami TR. #58**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE **DIRECTOR** ☒ Change ☐ Addition
NAME **RICHARD MARTIN**
STREET ADDRESS **18050 S TAMiami TR #154**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE **DIRECTOR - PRESIDENT** ☒ Change ☐ Addition
NAME **DARREL HOADLEY**
STREET ADDRESS **18050 S. TAMiami TR. #57**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **DIRECTOR - VICE PRESIDENT** ☐ Change ☒ Addition
NAME **WALTER MITCHELL**
STREET ADDRESS **18050 S. TAMiami TR. #140**
CITY-ST-ZIP **FORT MYERS FL 33908**TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **CHARLETTE MOORE SEVICK**
STREET ADDRESS **18050 S. TAMiami TR. #20**
CITY-ST-ZIP **FORT MYERS FL 33908**

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:

Darrel Hoadley **DARREL HOADLEY (PRESIDENT)**

Date

Daytime Phone #

4/30/02 941-267-3040

CR2E037 (9/01)