

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92203 011 ****61.25

DOCUMENT # 759967

1. Entity Name

LOVERS KEY BEACH CLUB CONDOMINIUM, INC.



Principal Place of Business

**8701 ESTERO BLVD
FT MYERS FL 33931-5127**

Mailing Address

**SUNSTREAM INC
6620 ESTERO BLVD
FORT MYERS BEACH FL 33931
US**

2. Principal Place of Business

3. Mailing Address

P.O. Box 110156

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**City & State
Naples, FL**

4. FEI Number **59-2447543**

Applied For

Not Applicable

Zip

Country

Zip

Country

34108

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MONSRUD, MARY A
SUNSTREAM, INC
6620 ESTERO BOULEVARD
FORT MYERS BEACH FL 33931**

Name

William D. White

Street Address (P.O. Box Number is Not Acceptable)

2310 Della De

City

Naples

FL

Zip Code

34117

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

William D. White, CAM

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

(NOTE: Registered Agent signature required when reinstating)

1/30/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☒ Delete
NAME **LAWRENCE, DAVID A**
STREET ADDRESS **1125 S FRONTAGE RD #4**
CITY-ST-ZIP **HASTINGS MN 55033**

TITLE **TD** ☐ Change ☒ Addition
NAME **Beebe, John C.**
STREET ADDRESS **10 Kennis Terrace**
CITY-ST-ZIP **Newport, RI 02840-4024**

TITLE **D** ☐ Delete
NAME **VOGEL, JAMES**
STREET ADDRESS **3936 TAMiami TRAIL N SUITE B**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **VP** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **GRUNDBERG, GUNNAR**
STREET ADDRESS **11018 LINNET LANE**
CITY-ST-ZIP **NAPLES FL 34119**

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

TITLE **SD** ☐ Delete
NAME **BUSSIERE, PAUL**
STREET ADDRESS **25823 W LOOMIS ROAD**
CITY-ST-ZIP **WIND LAKE WI 53185**

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

TITLE **TD** ☒ Delete
NAME **EIFLER, JOERG**
STREET ADDRESS **6090 ESTERO BLVD**
CITY-ST-ZIP **FORT MYERS BEACH FL 33931**

TITLE **D** ☐ Change ☒ Addition
NAME **Ness, John**
STREET ADDRESS **10229 N. 67th Lane**
CITY-ST-ZIP **Stillwater, MN 55082**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Assit. Sec. / M**
STREET ADDRESS **White, William D.**
CITY-ST-ZIP **2310 Della De
Naples, FL 34117**

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:

Paul Vogel

1/30/03 239-352-6780

CR2E037 (10/02)