

2000 UNIFORM BUSINESS REPORT (UBR) AMENDED

DOCUMENT #

762086

1. Entity Name

CAPTAIN'S HARBOR CONDOMINIUM ASSOCIATION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -4 AM 8:48

Principal Place of Business

Mailing Address

6213-E PRESIDENTIAL COURT
FT MYERS FL 33919
US

6213-E PRESIDENTIAL COURT
6213-E PRESIDENTIAL COURT, P.O. BOX 07038
FT MYERS FL 33919-0001
US

2. Principal Place of Business

C/O Henke Property Mgmt

3. Mailing Address

C/O Henke Property Mgmt

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6213-A Presidential Ct

6213A Presidential Ct

City & State

City & State

Fort MYERS, FL

FORT MYERS, FL

Zip

Country

Zip

Country

33919

USA

33919

USA

4. FEI Number

59-2443538

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HENKE, CAROL J.
C/O HENKE PROPERTY MANAGEMENT, INC.
6213-E PRESIDENTIAL COURT
FT MYERS FL 33919

7. Name and Address of New Registered Agent

Name

CAROL J. HENKE

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

C/O HENKE PROPERTY MGT., INC.

6213-A Presidential Ct

City

FORT MYERS

FL

Zip Code

33919

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

Carol J. Henke

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

(NOTE: Registered Agent signature required when reinstating)

4-27-2000

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	☒ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☒ Delete
NAME	700003265507
STREET ADDRESS	-05/24/00--01078--002
CITY-ST-ZIP	*****61.25 *****61.25
TITLE	☒ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☒ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☒ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☒ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	Dale Fischer	
STREET ADDRESS	16276 Nautical Way #1401	
CITY-ST-ZIP	Bokelia, FL 33922	
TITLE	VPD	☐ Change ☒ Addition
NAME	Clinton Savoury	
STREET ADDRESS	7660 Captains Harbor Dr #302	
CITY-ST-ZIP	Bokelia, FL 33922	
TITLE	VPD	☐ Change ☒ Addition
NAME	MICHAEL Faulkner	
STREET ADDRESS	7660 Captains Harbor Dr #306	
CITY-ST-ZIP	Bokelia, FL 33922	
TITLE	SD	☐ Change ☒ Addition
NAME	Richard Gentry	
STREET ADDRESS	7661 Captains Harbor Dr #1304	
CITY-ST-ZIP	Bokelia, FL 33922	
TITLE	TD	☐ Change ☒ Addition
NAME	Norman Bailey	
STREET ADDRESS	7628 Captains Harbor Dr #402	
CITY-ST-ZIP	Bokelia, FL 33922	
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:

Dale Fischer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

941-481-7150

4-27-00

1 AD