**FILED** 

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

## Apr 01, 2002 8:00 am Secretary of State DOCUMENT # 765590 1. Entity Name -01-2002 90638 043 \*\*\*\*61 25 QUAIL RUN GOLF CLUB, INC. Principal Place of Business Mailing Address #1 FOREST LAKES BLVD. #1 FOREST LAKES BLVD. NAPLES FL 34105 NAPLES FL 34150 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2199546 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Same Street Address (P.O. Box Number is Not Acceptable) ·CUSHMAN, JERRY 1056 FOREST LAKES DR B-210 NAPLES FL 34105 Zip Code pose of changing its registered office or registered agent, or both, in the state of Florida The above named entity submits this statement for t <u> Jerry Cushman, President</u> SIGNATURE nted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to NOW! FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01) **VP** ☐ Delete X Addition TITLE TITLE Change WELLS, JOYCE NAME NAME Fisher, Richard A. STREET ADDRESS STREET ADDRESS 300 FOREST LAKES BLVD #112 831 Sailaway Ln Apt 202 CITY-ST-7IP CITY-ST-ZIP NAPLES FL 34105 Naples, FL 34108 XX Delete Change TITLE TITLE \*Addition GANNON, THOMAS NAME NAME Lee, Richard A. STREET ADDRESS STREET ADDRESS 1083 FOREST LAKES DR #107 1085 Forest Lakes Dr. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105. Naples, FL 34105 Addition TITLE TITLE XX Delete NAME O'CONNOR, COLLINS NAME Benner, George J. STREET ADDRESS STREET ADDRESS 1086 FOREST LAKES DR #109 1055 Forest Lakes Dr. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105 Naples, FL 34105 ☐ Delete TITLE x Change ☐ Addition TITLE S FAGERILE, KEN NAME NAME Fagerlie, Ken STREET ADDRESS STREET ADDRESS 1021 FOREST LAKES DR 1021 Forest Lakes Dr CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105 Naples, FL 34105 XX Delete ☐ Addition TITLE TITLE ☐ Change ROTHROCK, WINIFRED NAME NAME STREET ADDRESS STREET ADDRESS 3231 HORSE CARRIAGE WAY #3 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105 TITLE ☐ Addition TITLE Delete CRAWFORD, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 1516 FOREST LAKES BLVD CITY-ST-7iP CITY-ST-7IP NAPLES FL 34105 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 emporered to execute/this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

MFJerry Cushman, President 3/18/02 239-261-2198 SIGNATURE:

changed, or on an attachment with an address