

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 765625

FILED  
May 06, 2002 8:00 AM  
Secretary of State

**Entity Name:** VILLANOVA COLONNADE CONDOMINIUM, SECTION II, ASSOCIATION, INC.

**Current Principal Place of Business:**

27657 OLD 41  
P O BOX 2507  
BONITA SPRINGS, FL 339592507

**New Principal Place of Business:**

9861 ALABAMA STREET  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

27657 OLD 41  
P O BOX 2507  
BONITA SPRINGS, FL 339592507

**New Mailing Address:**

PO BOX 2507  
BONITA SPRINGS, FL 34133 US

**FEI Number:** 59-2335819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, BRADLEY R  
27657 OLD 41 ROAD  
BONITA SPRINGS, FL 34135

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: MARIAM, HAILLE  
Address: 9861 ALABAMA STREET #1  
City-St-Zip: BONITA SPRINGS, FL

Title: PD ( ) Delete  
Name: LUCKEY, FLOYD JR.,  
Address: 5164 BONITA BEACH RD SW  
City-St-Zip: BONITA SPRINGS, FL

Title: STD ( ) Delete  
Name: LUCKEY, BARBARA  
Address: 5164 BONITA BCH RD SW  
City-St-Zip: BONITA SPRINGS, FL 34134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FLOYD LUCKEY JR.

PD

05/06/2002

Electronic Signature of Signing Officer or Director

Date