## 'AMENDED' 2000 UNIFORM BUSINESS REPORT (UBR)

JEFF DARRACH

				•	<u>•</u>
<b>DOCUMENT #</b> 768250					
1. Entity Name DANPORT CENTER PROPERTY OWNERS' ASSOCIATION, INC.				FILED	
				00 NOV 27 PM 3: 24	
Principal Place	e of Business	Mailing Address			SECRETARY OF STATE
	<del>inson-Road</del>	<del>2004</del> – <del>Johnson</del> –R <del>oad</del>			TALLAHASSEE ELORIDA
<del>Immekal</del> e	eFF-34145	Immokalee,-FL-34142			RECHINDSEL I I I UNIDA
	•		•		I SARATARI SIR IDIRE IMIL 2015 SANI ARSII ARSII ARSII DEIRE EVIRI FELDI INC.
2. Principal Pl	lace of Business	3. Mailing Address			
	etro Parkway	1 <sup>1</sup> 4291 Metro Parkway Suite Apt, #, etc.			DO NOT WRITE IN THIS SPACE
Suite, Apt. Buildin	•	Building 1300			DO NOT WRITE IN THIS SPACE
City & State	е _	City & State			4. FEI Number Applied For
	ersy FL	Fort Myers, FL Zip Country		D/	65-0411634 Not Applicable  5 0-477-4-9 of Status Desired
Zip 33912	Country USA	33912	USA	•	5. Certificate of Status Desired Fee Required
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent
	J-Douglas-L-		· /	Name D	ARRAGH, JEFF
	hnson-Road .eeFL34142		Street Address 1429		dress (P.O. Box Number is Not Acceptable) 4291 Metro Parkway
#WMAVGT	·667-##3+#46			В	Building 1300
			.	City	Zip Code
9. The shows	named antifixenhmite this statement for	r the purpose of changing its	registere		ort Myers 33912 registered agent, or both, in the State of Florida.
o. The above	That he de minty south his state ment for	the perpose of orlanging no	. rog.uto.u		1 1
SIGNATURE	XXXXX				eff Darragh, President 11/5/00
			E: Registered	Agent signature	e required when renstating) DATE
Tax filing r	Station is eligible to satisfy its Intangible equirement and elects to do so.				10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	PD JOHNSON, DOUGLAS	∑ Delete	TITLE		PD □ Change □ Addition DARRAGH, JEFF
NAME STREET ADDRESS	2000 Johnson Road	•			14291 Metro Parkway, Building 1300
CITY-ST-ZIP	Immokalee, FL 34142		CITY		Fort Myers, FL 33912
TITLE	STD WELLS, DRUCILLA G.	∑ Delete	TITLE NAME	1	SD Change Maddition
NAME STREET ADDRESS	2004 Johnson Road			ET ADDRESS	CRIBBETT, GLENN 14291 Metro Parkway, Building 1300
CITY-ST-ZIP	Immokalee, FL 34142	2	CITY-		Fort Myers, FL 33912
TITLE	VPD	□ Delete	TITLE NAME		VPD ☐ Change ☒ Addition PATEL, BARRY
NAME STREET ADDRESS	JOHNSON, INA L. 2000 Johnson Road				14291 Metro Parkway, Building 1300
CITY-ST-ZIP	Immokalee, FL 34142		CITY-		Fort Myers, FL 33912
TITLE		☐ Delete	TITLE		T Change 🖾 Additio
NAME STREET ADDRESS		•	NAME STREE	E Et address	RUSSELL, DIANE 14291 Metro Parkway, Building 1300
CITY-ST-ZIP	·				Fort Myers, FL 33912
TITLE		☐ Delete	TITLE		☐ Change ☐ Additio
NAME STREET ADDRESS			NAME STREE	ET ADDRESS	0000034926501
CITY-ST-ZIP			CITY-	-ST-ZIP	- 12411750-00010-0000000000000000000000000000
TITLE		☐ Delete	TITLE		☐ Change
NAME STREET ADDRESS			NAME STREE	ET ADDRESS	-10
CITY-ST-ZIP				-ST-ZIP	
13. 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 co	on this report or supplemental report is rporation or the receiver of trustee empor i, or on an attachment with an address, i	nwered to execute this report	t as requir	red by Chap	pter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 i
changed	, or on an authorn with directiness,	D Charles	ng awa gan'i	T)	resident 11/15/00 (941) 561-4666
SIGNATURE: President 1/5/00 (941) 561-4666  SIGNATURE: SKONATURE NAME OF SIGNANG OFFICER OR DIRECTOR DESCRIPTION OF SIGNANG OFFICER OR DESCR					
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