

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90194 004 ****61.25

DOCUMENT # 768534

1. Entity Name

SPORTSMAN'S COVE CONDOMINIUM ASSOCIATION, INC.



90010533



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business
13451 MCGREGOR BLVD. STE 32
FORT MYERS FL 33919
US

Mailing Address
13451 MCGREGOR BLVD. STE 32
FORT MYERS FL 33919
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2394322**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Pepton
REALTY MGMT SVCS CORP
4210 METRO PARKWAY
SUITE 240
FT MYERS FL 33916
13451 McGregor #32
Fort Myers FL 33919

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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 **S** ☐ Delete
NAME **LEE, MAURICE**
STREET ADDRESS **892 BUTTONWOOD DR 223**
CITY-ST-ZIP **FT MYERS BCH FL**

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

TITLE **PD** ☐ Delete
NAME **FERRY, ROBERT**
STREET ADDRESS **898 BUTTONWOOD DR 106**
CITY-ST-ZIP **FT MYERS FL**

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

TITLE **T** ☐ Delete
NAME **STEINKAMP, ROBERT**
STREET ADDRESS **894 BUTTONWOOD DRIVE, #217**
CITY-ST-ZIP **FT MYERS BEACH FL**

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

TITLE **VP** ☐ Delete
NAME **DE BERNARDI, ALBERT**
STREET ADDRESS **894 BUTTONWOOD DRIVE #219**
CITY-ST-ZIP **FT. MYERS BEACH FL 33931**

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

TITLE **D** ☐ Delete
NAME **SMITH, RICHARD**
STREET ADDRESS **894 BUTTONWOOD DR #216**
CITY-ST-ZIP **FORT MYERS BEACH FL 33931**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Matthew Pepton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-03 239-274-9101

Date Daytime Phone #

CR2E037 (10/02)