

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 27 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # L97000000557

1. Entity Name

HANSEN LAND COMPANY, L.C.

Principal Place of Business

20700 ZEMEL RD.
PUNTA GORDA FL

Mailing Address

2269 QUEENS WAY
NAPLES FL 34112-5425

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0756501

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOMBARDO, J. CHRISTOPHER
801 LAUREL OAK DR., STE. 640
NAPLES FL 34108

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.

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 \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MEM ☐ Delete
STREET ADDRESS LOMBARDO, J. CHRISTOPHER
CITY-ST-ZIP 122 CARICA RD.
NAPLES FL 34108

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 100003249851--0
CITY-ST-ZIP -05/11/00--01129--019
*****50.00 *****50.00
☐ Change ☐ Addition

TITLE NAME MEM ☐ Delete
STREET ADDRESS THALHEIMER, SANDY
CITY-ST-ZIP 2269 QUEENS WAY
NAPLES FL 34108

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

TITLE NAME MEM ☐ Delete
STREET ADDRESS HURST, JOHN R
CITY-ST-ZIP 3475 14TH ST., N.
NAPLES FL 34105

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

TITLE NAME MEM ☐ Delete
STREET ADDRESS HRESTAK, HRVOJE J
CITY-ST-ZIP 43 SAN REMO CIR.
NAPLES FL 34112

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

TITLE NAME MEM ☐ Delete
STREET ADDRESS HUDSON, MARK L
CITY-ST-ZIP 4920 CORTEZ CIR.
NAPLES FL 34112

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

TITLE NAME MEM ☐ Delete
STREET ADDRESS BAILY, THOMAS
CITY-ST-ZIP 2156 42ND ST., SW
NAPLES FL 34109

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER SANDY C. THALHEIMER 4/24/00 941-774-4912
Date Daytime Phone #

CR2E083 (3/99)