

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 21, 2001 8:00 am
Secretary of State

09-21-2001 90003 016 ****61.25

DOCUMENT # **N00000001494**

1. Entity Name

BONITA PROFESSIONAL CENTER OWNERS' ASSOCIATION,

CA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**3033 RIVIERA DRIVE #202
 NAPLES FL 34103**

Mailing Address

**3033 RIVIERA DRIVE #202
 NAPLES FL 34103**

2. Principal Place of Business

8880 Terrene Court
 Suite, Apt. #, etc.

3. Mailing Address

8880 Terren Court
 Suite, Apt. #, etc.

City & State

Bonita Springs, FL

City & State

Bonita Springs, FL

4. FEI Number

59-3630928

Applied For

Not Applicable

Zip

34135

Country

USA

Zip

34135

Country

USA

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MORRISON, DAVID N ESQ.
 3838 TAMiami TRAIL NORTH
 SUITE 402
 NAPLES FL 34103**

7. Name and Address of New Registered Agent

Name **Caloosa Property Management**

Street Address (P.O. Box Number is Not Acceptable)

8880 Terrene Court

City

Bonita Springs

FL

Zip Code

34135

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 **Laurie Miller**

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

Laurie Miller

(NOTE: Registered Agent signature required when reinstating)

9/17/01

DATE

**FILE NOW: FEE IS \$61.25
 After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** Delete

NAME **SVOBODA, BRIT E**
 STREET ADDRESS **3033 RIVIERA DRIVE #202**
 CITY-ST-ZIP **NAPLES FL 34103**

TITLE **D** Delete

NAME **KILBOURN, MICHAEL**
 STREET ADDRESS **3033 RIVIERA DRIVE #202**
 CITY-ST-ZIP **NAPLES FL 34103**

TITLE **D** Delete

NAME **THEISS, BRIAN**
 STREET ADDRESS **7516 CORDOBA CIRCLE**
 CITY-ST-ZIP **NAPLES FL 34109**

TITLE Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition

NAME **Lee Quernheim**
 STREET ADDRESS **8870 Terrene Court**
 CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE Change Addition

NAME **Mark K. Rasmus**
 STREET ADDRESS **8880 Terrene Court**
 CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE Change Addition

NAME **Thomas Holcombe**
 STREET ADDRESS **8860 Terrene Court**
 CITY-ST-ZIP **Bonita Springs, FL 34135**

TITLE Change Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition

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:

Thomas Holcombe

9/17/01 (Am) 949-2900

0013724

CR2E037 (5/01)