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

## DOCUMENT # N0000003140

1. Entity Name

## LIME TREE CENTER I CONDOMINIUM ASSOCIATION, INC.



**FILED** Feb 05, 2003 8:00 am Secretary of State 02-05-2003 90141 018 \*\*\*\*61.25

|  |  |  |   |                                  |   |   | -             |                                |                 |                    |                            |   |   |
|--|--|--|---|----------------------------------|---|---|---------------|--------------------------------|-----------------|--------------------|----------------------------|---|---|
| Principal Plac   | e of Business  |  | Mailing                                 | g Address                        |   |   |               |                                |                 |                    |                            |   |   |
| P.O. BOX 214<br>SANIBEL ISLAND FL 33957  |  |  | P.O. BOX 214<br>SANIBEL ISLAND FL 33957 |                                  |   |   |               |                                |                 |                    |                            |   |   |
| 2. Principal Place of Business   |  |  |   | 3. Mailing Address               |   |   |               |                                |                 |                    |                            |   |   |
| Suite, Apt. #, etc.  |  |  | Suite, Apt. #, etc.                     |                                  |   |   |               | ☐ CHECK HERE IF MAKING CHANGES |                 |                    |                            |   |   |
|  |  |  |   |                                  |   |   |               |                                |                 |                    |                            |   |   |
| City & State   |  |  | City & State                            |                                  |   | 4. FEI Number   |               | r 65-10384                     | 5-1038469       |                    |                            | Applied For<br>Not Applicable           |   |
| Zip  |  | Country  | Zip                                     | 1                                | Cou   | intry   |               | 5. Certificate                 | of Status Des   | red [              |                            | <b>8.75</b> Ad<br>se Require            |   |
|  | 6. Name a  | nd Address of Current I  | Registere                               | d Agent                          |   |   |               | 7. Name and                    | Address of N    | lew Regist         | ered Ag                    | ent ====                                |   |
|  |  |  |   |                                  |   | Name  |               |                                |                 |                    |                            |   |   |
| 1640 PEF   | R, RICHARD (<br>RIWINKLE WA  | Y, STE. V  |   |                                  |   | Street Add  | dress (P.     | O. Box Numbe                   | r is Not Acce   | otable)            |                            |   |   |
| SANIBEL ISLAND FL 33957  |  |  |   |                                  | City  |   |               |                                |                 | FL                 | Zip Cod                    | le                                      |   |
| 8. The above   | named entity s   | ubmits this statement for  | r the purpo                             | ose of changing its              | registere   | d office or re  | egistered     | d agent, or both               | h, in the State | of Florida.        |                            | I<br>niliar with.                       | and accept  |
| the obligat  | tions of register  | ed agent.  |   |                                  | -   |   | -             | =                              |                 |                    |                            |   | •   |
|  |  |  |   |                                  |   |   |               |                                |                 |                    |                            |   |   |
|  | , <u>, , , , , , , , , , , , , , , , , , </u>  |  |   |                                  |   |   |               | non reinetation)               |                 |                    | DATE                       |   |   |
| SIGNATURE .  | Signature, typed or  | printed name of registered agent a   | and title if appl                       | icable. (NOTE                    | E: Registered   | d Agent signature   | e required wi | ion romatating/                |                 |                    |                            |   |   |
| SIGNATURE .  | Signature, typed or  | printed name of registered agent a   | and title if appli                      | icable. (NOTE                    | : Registered  | d Agent signature   | required wi   |                                |                 |                    |                            |   |   |
|  |  | printed name of registered agent a   | and title if appli                      | 9. Election Can Trust Fund C     | npaign F  | inancing  |               | 55.00 May B                    |                 |                    | heck                       | Payable<br>nent of                      |   |
|  | FILE NOW:  |  |   | 9. Election Can                  | npaign F  | inancing  |               | 55.00 May B                    | F               | Make C<br>lorida D | heck<br>epartn             | nent of                                 | State   |
| ı  | FILE NOW:  | FEE IS \$61.25 OFFICERS AND DIR  |   | 9. Election Can                  | npaign F<br>Contributi  | inancing<br>on.   |               | 65.00 May B                    | F               | Make C<br>lorida D | heck<br>epartn             | nent of                                 | State   |
| 10. TITLE NAME   | FILE NOW:  | FEE IS \$61.25  OFFICERS AND DIR   |   | 9. Election Carr<br>Trust Fund C | npaign F<br>Contributi<br>11.   | inancing<br>on.   |               | 65.00 May B                    | F               | Make C<br>lorida D | heck<br>epartn             | CTORS IN                                | State   |
| 10. TITLE NAME STREET ADDRESS  | PD<br>BRODEUR, I<br>P.O. BOX 21  | FEE IS \$61.25  OFFICERS AND DIR RICHARD J 4   |   | 9. Election Carr<br>Trust Fund C | npaign F<br>Contribution<br>11.<br>TITLE<br>NAME  | inancing on.  |               | 65.00 May B                    | F               | Make C<br>lorida D | heck<br>epartn             | CTORS IN                                | State   |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>BRODEUR, I<br>P.O. BOX 21<br>SANIBEL ISL   | FEE IS \$61.25  OFFICERS AND DIR   |   | 9. Election Can<br>Trust Fund C  | npaign F<br>Contributi<br>11.<br>TITLE<br>NAMI<br>STRE  | inancing on.  |               | 65.00 May B                    | F               | Make C<br>lorida D | Check<br>epartn<br>ND DIRE | CTORS IN Change                         | State 1 10 Addition                                 |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | PD<br>BRODEUR, I<br>P.O. BOX 21<br>SANIBEL ISI<br>VD   | FEE IS \$61.25  OFFICERS AND DIR RICHARD J 4   |   | 9. Election Carr<br>Trust Fund C | npaign F<br>Contribution<br>11.<br>TITLE<br>NAME<br>STRE<br>CITY:   | inancing on.  |               | 65.00 May B                    | F               | Make C<br>lorida D | Check<br>epartn<br>ND DIRE | CTORS IN                                | State   |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>BRODEUR, I<br>P.O. BOX 21<br>SANIBEL ISI<br>VD<br>RASI, KEN  | FEE IS \$61.25  OFFICERS AND DIR RICHARD J 4 AND FL 33957                                      |   | 9. Election Can<br>Trust Fund C  | npaign F Contribution  11.  TITLE NAME STRE CITY- TITLE NAME NAME   | inancing on.  |               | 65.00 May B                    | F               | Make C<br>lorida D | Check<br>epartn<br>ND DIRE | CTORS IN Change                         | State 1 10 Addition                                 |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | PD<br>BRODEUR, I<br>P.O. BOX 21<br>SANIBEL ISI<br>VD<br>RASI, KEN<br>1640 PERIW<br>SANIBEL ISI                                     | FEE IS \$61.25  OFFICERS AND DIR RICHARD J 4   |   | 9. Election Can<br>Trust Fund C  | npaign F<br>Contributi<br>11.<br>TITLE<br>NAMI<br>STRE<br>CITY-<br>TITLE<br>NAME<br>STRE  | inancing on.  |               | 65.00 May B                    | F               | Make C<br>lorida D | Check<br>epartn<br>ND DIRE | CTORS IN Change                         | State 1 10 Addition                                 |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | PD<br>BRODEUR, I<br>P.O. BOX 21<br>SANIBEL ISI<br>VD<br>RASI, KEN<br>1640 PERIW<br>SANIBEL ISI                                     | OFFICERS AND DIR RICHARD J 4 AND FL 33957 INKLE WAY, UNIT II AND FL 33957                      |   | 9. Election Can<br>Trust Fund C  | npaign F<br>Contributi<br>11.<br>TITLE<br>NAMI<br>STRE<br>CITY-<br>TITLE<br>NAME<br>STRE  | inancing on.  |               | 65.00 May B                    | F               | Make C<br>lorida D | Check<br>epartn<br>ND DIRE | CTORS IN Change                         | State 1 10 Addition                                 |
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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 attackment with an address, with all other like empowered.

SIGNATURE: