

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00029

1. Entity Name

COUNTRY LAKES OWNERS' ASSOCIATION, INC.

FILED

Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90109 009 ****61.25

Principal Place of Business

5267 COUNTRY FIELD CIRCLE
FT. MYERS FL 33905
US

Mailing Address

5267 COUNTRY FIELD CIRCLE
FT MYERS FL 33905
US

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 59-2410195

Applied For

Not Applicable

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

ELLER, POLLYE
5426 COUNTRY DALE COURT
FORT MYERS FL 33905

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 Pollye Eller

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME CINDRICH, GARY
STREET ADDRESS 9864 CATTAIL CT
CITY-ST-ZIP FT. MYERS FL 33905

TITLE ☐ Change ☐ Addition
NAME Vice President VP
STREET ADDRESS Cindrich Gary
CITY-ST-ZIP 9864 Cattail Ct
ft myers, fl 33905

TITLE ☐ Delete
NAME ELLER, POLLYE
STREET ADDRESS 5426 COUNTRY DALE COURT
CITY-ST-ZIP FT MYERS FL

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

TITLE ☐ Delete
NAME FRUTICER, LAVERNE
STREET ADDRESS 5432 COUNTRY FIELD CIR
CITY-ST-ZIP FORT MYERS FL 33905

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

TITLE ☒ Delete
NAME SHELTON, DOROTHY
STREET ADDRESS 9830 CREEKWODD LN
CITY-ST-ZIP FT MYERS FL 33905

TITLE ☐ Change ☒ Addition
NAME Dorothy Shelton S
STREET ADDRESS 5311 Country Dale Ct
CITY-ST-ZIP ft myers, fl 33905

TITLE ☐ Delete
NAME RUTKA, JOHN
STREET ADDRESS 5448 COUNTRY DALE CT
CITY-ST-ZIP FT. MYERS FL 33905

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

TITLE ☐ Delete
NAME WENTZELL, JACK
STREET ADDRESS 9856 CATTAIL COURT
CITY-ST-ZIP FORT MYERS FL 33905

TITLE ☒ Change ☐ Addition
NAME Director D
STREET ADDRESS Wentzell Jack
CITY-ST-ZIP 9856 Cattail Ct
ft myers, fl 33905

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-02 941-693-8338

Date

Daytime Phone #

CR2E037 (9/01)