

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State

0072665

DOCUMENT # N08890

1. Entity Name

GREYSTONE PARK MOBILE HOMEOWNERS, INC.

03-12-2001 90464 015 ****61.25

Principal Place of Business

13300 E. TAMiami TRAIL
 LOT 65
 NAPLES FL 34114
 US

Mailing Address

13300 E. TAMiami TRAIL
 LOT 65
 NAPLES FL 34114
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13300 E. Tamiami Trail

3. Mailing Address

13300 E. Tamiami Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Lot #66

Lot 66

City & State

City & State

NAPLES, FL 34114

Naples, FL 34114

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

34114

USA

34114

USA

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

ERWIN, SHIRLEY
 13300 E TAMiami TRAIL
 LOT 65
 NAPLES FL 34114

Name

Matt Kamieniarz

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

Lot 66

13300 E. Tamiami Trail

City

Naples,

FL

Zip Code

34114

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.

Matthew Kamieniarz

SIGNATURE Matt Kamieniarz (Park Contact Person)

3-09-01

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
 NAME **PERRY, GEORGE**
 STREET ADDRESS **13300 E TAMiami TR, LOT 30**
 CITY-ST-ZIP **NAPLES FL 34114**

TITLE **S** ☒ Change ☐ Addition
 NAME **Lorraine Funke**
 STREET ADDRESS **Lot 8 - 13300 E. Tamiami Trail**
 CITY-ST-ZIP **Naples, FL 34114**

TITLE **D** ☐ Delete
 NAME **FREIWALD, DICK**
 STREET ADDRESS **13300 E. TAMiami TR. #48**
 CITY-ST-ZIP **NAPLES FL 34114**

TITLE **T** ☒ Change ☐ Addition
 NAME **Wayne Alexander**
 STREET ADDRESS **Lot 10 - 13300 E. Tamiami Trail**
 CITY-ST-ZIP **Naples, FL 34114**

TITLE **T** ☒ Delete
 NAME **CHARTRAND, PATRICIA**
 STREET ADDRESS **13300 E TAMiami TRAIL, LOT 63**
 CITY-ST-ZIP **NAPLES FL**

TITLE **D** ☒ Change ☐ Addition
 NAME **Cliff Erwin**
 STREET ADDRESS **Lot 65 - 13300 E. Tamiami Trail**
 CITY-ST-ZIP **Naples, FL 34114**

TITLE **S** ☒ Delete
 NAME **ERWIN, SHIRLEY**
 STREET ADDRESS **13300 E TAMiami TRAIL LOT 65**
 CITY-ST-ZIP **NAPLES FL**

TITLE **D** ☒ Change ☐ Addition
 NAME **Art Covey**
 STREET ADDRESS **Lot 27 - 13300 E. Tamiami Trail**
 CITY-ST-ZIP **Naples, FL 34114**

TITLE **VPD** ☐ Delete
 NAME **TUMBLESon, STARLING**
 STREET ADDRESS **13300 E. TAMiami TR. #33**
 CITY-ST-ZIP **NAPLES FL 34114**

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

TITLE **D** ☒ Delete
 NAME **BECK, WILLIAM**
 STREET ADDRESS **13300 E TAMiami TR LOT 50**
 CITY-ST-ZIP **NAPLES FL**

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: *Lorraine Funke*

Lorraine Funke, Secretary - 941-732

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 3/09/01 Daytime Phone # 8628

CR2E037 (10/00)