2002 UNIFORM BUSINESS REPORT (UBR) **FILED** Apr 21, 2002 8:00 am Secretary of State **DOCUMENT # N16772** 1. Entity Name **GOLFVIEW GOLF & RACQUET CLUB COMMUNITY ASSOCIATI** 04-21-2002 90864 044 ****61.25 ON, INC. Principal Place of Business Mailing Address 14849 HOLE IN ONE CIRCLE SW 14849 HOLE-IN-ONE CIRCLE FORT MYERS FL 33919 FORT MYERS FL 33919-7147 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0048149 Not Applicable Zip .Country ےپZip Country **\$8.75**. Additional -5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Jue DENNIS Street Address (P.O. Box Number is Not Acceptable) CATOE, DENNIS 19391 DEVONWOOD CIRCLE 8DISON WEST PALM BEACH FL 33412 33936 MURRS 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 Ų. 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. **VPD** TITLE □ Delete TITLE D ■ Addition DEBENEDICTIS, ANGELO NAME NAME 14861 HOLE-IN-ONE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP FT MYERS FL 33919 TITLE D ☐ Delete TITLE Change ☐ Addition ROSS, GERALD NAME NAME STREET ADDRESS 14851 HOLE-IN-ONE STREET ADDRESS CITY-ST-ZIP FT. MYERS FL CITY-ST-ZIP TITLE SD Delete TITLE Change ☐ Addition O'CONNOR, VINCE NAME NAME STREET ADDRESS 14771 HOLE-IN-ONE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL TD ☐ Delete TITLE ☐ Change ☐ Addition TID F

FORT MYERS FL 33919 I hereby certify that the information supplied with this filling 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 address III other like empowered.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

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NAME

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

GROSS, JOHN

14891 HOLE-IN-ONE CIR

14831 HOLE IN ONE CIR #205

14871 HOLE-IN-ONE CIRCLE

FT MYERS FL 33919

DUFFEY, THOMAS

FT MYERS FL

RIZZO, TONY

☐ Delete

☐ Delete

Change

Change

☐ Addition

Addition