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

DOCUMENT# /

New Brittany Office Condominium Association Inc



## **FILED** Mar 31, 2003 8:00 am Secretary of State

03-31-2003 90221 049 \*\*\*\*61.25

2. Principal Place of Business 12650 New Brittany Blvd 3. Mailing Address 13241 University Drive 101/102 \*, etc. Suite, Apt. #, etc. 102 City & State City & State Fort Myers FL Fort Myers

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 65-0123356 Not Applicable

Country Zip Country 33907

\$8.75 Additional Fee Required

## DO NOTWRITE IN THIS SPACE

Joseph	W	Huff	Jr

Street Address (P.O. Box Number is Not Acceptable)
13241 University Drive

5. Certificate of Status Desired

7. Name and Address of Current Registered Agent

Suite 102

City Fort Myers

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. I am familiar with, and accept the obligations of registered agent.

33907

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

(NOTE: Registered Agent signature required when reinstating)

FEE IS \$61.25 Initial or Amended USR

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS TITLE PDST Huff, Joseph W STREET ADDRESS STREET ADDRESS 13241 University Drive #102 CITY-ST-ZIP CITY-ST-ZIP Fort Myers FL 33907 NAME Huff, Mickey H STREET ADDRESS STREET ADDRESS 13241 University Drive #102 Fort Myers FL 33907 CITY-ST-ZIF CITY-ST-ZIP TITLE TITLE NAME Sherrill, Art 9901 Sunset-Cove-#233 NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP Fort Myers FL 33919 TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

3-26-03

239-936-4858