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

DOCUMENT # N28073



FILED Jan 10, 2003 8:00 am Secretary of State

239-433-0792

| MCGREGO | PARK CONDOMINIUM AS | SOCIATION, INC. | | | 01-10-2003 90226 01 | 9 ****61.25 | |
|--|---|--|---------------------------------------|--|--|---|--|
| Principal Place of Business 2510 MCGREGOR PARK CIR FORT MYERS FL 33908 US | | Mailing Address 2510 MCGREGOR PARK CIR FT. MYERS FL 33908 US | | 10002232 | | | |
| 2. Principal Pl | lace of Business | 3. Mailing Address | ···· | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & State | | 05 007 1072 | | Applied For Not Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of State | | 3.75 Additional e Required | |
| | 6. Name and Address of Current I | Registered Agent | | 7. Name and Addre | ss of New Registered Age | ent | |
| | | | Name | | | | |
| 1102 MC | O, THOMAS S JR. GREGOR PARK CIRCLE S FL 33908 | | Street Address | Street Address (P.O. Box Number is Not Acceptable) | | | |
| ri Mitch | 3 FL 33800 () | | City | | FL | Zip Code | |
| SIGNATURE . | Signature, typed or printed name of registered agent a | and title if applicable (NOTE: | Registered Agent signature requi | | /- 6 - 03 DATE Make Check F | Pavable to | |
| ı | FILE NOW: FEE IS \$61.25 | Trust Fund Co | · · · · · | Added to Fees | Florida Departm | ent of State | |
| 10. | OFFICERS AND DIF | RECTORS | 11. | ADDITIONS/CHANGES | TO OFFICERS AND DIREC | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP MCENTAFFER, VICKI 801 MCGREGOR PARK CIR FT. MYERS FL 33908 | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Change Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS WELLS, ARTHUR 2002 MCGREGOR PARK CIR FT. MYERS FL 33908 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CAMPBELL, CHRISTINE 202 MEGREGOR PARK CIR FORT MYERS FL 33908 | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | AN R. Thomas mc CRE | 1,050N YOR PARK CHA S. FL- 339 | change Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT BUMBALO, TOM 1102 MCGREGOR PARK CIRCLE FORT MYERS FL 33908 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | • | | Change Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP CATHERS, KIMBERLY ESQ 2101 MCGREGOR PARK CIRCLE FORT MYERS FL 33908 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Change Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ARLES O 4 McGRE AT MYEN | SBORNE GOR PARK CI · FL-3396 | Change Addition | |
| indicated of the col | certify that the information supplied with d on this report or supplemental report is rporation or the receiver or trustee emp i, or on an attachment with an address, | s true and accurate and that mo owered to execute this report a | the exemption stated in | Section 119.0%(3)(i), Flor he same legal effect as if | ida Statutes. I further certify made under oath; that I am that my name appears in E | y that the information an officer or director | |