

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N28768

FILED
Mar 05, 2003
Secretary of State

Entity Name: CALOOSA ISLES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9854 CALOOSA YACHT & RACQUET CLUB DR
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

12650 WHITEHALL DR.
FORT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 65-0009870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENSON, MARK R
12650 WHITEHALL DR.
FORT MYERS, FL 33907

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURTHA, JOHN
Address: 9709 KEEL CT
City-St-Zip: FORT MYERS, FL 33919

Title: STD () Delete
Name: MULFORD, GAIL
Address: 9604 HALYARDS CT #11
City-St-Zip: FORT MYERS, FL 33919

Title: VD () Delete
Name: CURRY, RICHARD
Address: 9656 HALYARDS CT #14
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: QUODOMINE, RICHARD
Address: 9598 HALYARDS CT #14
City-St-Zip: FORT MYERS, FL 33919

Title: VD (X) Change () Addition
Name: FARREN, PAULINE
Address: 9662 HALYARDS CT #21
City-St-Zip: FORT MYERS, FL 33919

Title: STD (X) Change () Addition
Name: GREEN, GARY
Address: 9660 HALYARDS CT #12
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD QUODOMINE

PD

03/05/2003

Electronic Signature of Signing Officer or Director

Date