

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30469

1. Entity Name

THE COACH HOMES OF BERKSHIRE LAKES CONDOMINIUM A

FILED

Apr 26, 2000 8:00 am  
Secretary of State

04-26-2000 90062 008 \*\*\*\*61.25

Principal Place of Business

Mailing Address

C/O R & P PROPERTY MGMT  
265 AIROPRT RD. S.  
NAPLES FL 34104  
US

C/O R & P PROPERTY MGMT  
265 AIROPRT RD. S.  
NAPLES FL 34104  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0180332

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

R & P PROPERTY MGMT  
265 AIRPORT RD. S.  
NAPLES FL 34104

Name

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

City

FL

Zip Code

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

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 PD  
NAME TORKILDTSEN, EDWARD  
STREET ADDRESS 174 BENNINGTON DRIVE #1  
CITY-ST-ZIP NAPLES FL 34104 ☒ Delete

TITLE  
NAME ~~PA~~  
STREET ADDRESS ~~Dobbs~~  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD  
NAME SULLIVAN, DOROTHY  
STREET ADDRESS 206 BENNINGTON DR #1  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

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

TITLE TD  
NAME ROBERGE, ANNETTE  
STREET ADDRESS 191 BENNINGTON DR #2  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE ~~TD-SS~~  
NAME ~~→~~ Roberge, Annette  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE VD  
NAME MCCARTHY, JOSEPH  
STREET ADDRESS 7306 ASCOT COURT 4  
CITY-ST-ZIP NAPLES FL 34104 ☒ Delete

TITLE  
NAME Patton, Jerry  
STREET ADDRESS 47 Bennington Drive, #5  
CITY-ST-ZIP PD Naples, FL 34104 ☐ Change ☐ Addition

TITLE TD  
NAME DOBBS, MARY  
STREET ADDRESS 191 BENNINGTON DRIVE #6  
CITY-ST-ZIP NAPLES FL 34104 ☐ Delete

TITLE  
NAME ~~→~~ Dobbs, Mary  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-17-2000 (941) 455-3839

CR2E037 (9/99)