

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

FILED
Sep 02, 2003 8:00 am
Secretary of State

09-02-2003 90192 050 ****61.25

0014271

DOCUMENT # N30842

1. Entity Name

PRINCETON STREET GARDENS PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

P. O. BOX 7326
FORT MYERS FL 33911-7326

Mailing Address

P. O. BOX 7326
FORT MYERS FL 33911-7326

2. Principal Place of Business

3. Mailing Address

4056 PRINCETON ST.
Suite, Apt. #, etc.

4056 PRINCETON ST.
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

FT. MYERS, FL

City & State

FT. MYERS, FL

4. FEI Number **65-0201900**

Applied For

Not Applicable

Zip

Country

33901

Zip

Country

33901

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUNDSCHU, CHARLES C JR.
8510 GRANTIE COURT
FORT MYERS FL 33908

7. Name and Address of New Registered Agent

Name **STEPHEN A. SHORTRIDGE**
Street Address (P.O. Box Number is Not Acceptable)
4056 PRINCETON ST.
City **FT. MYERS** FL Zip Code **33901**

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

SIGNATURE

Stephen P. Shortridge - President

8-29-03

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
After September 10, 2003, min will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	WICKLANDER, ROD	
STREET ADDRESS	1318 WAYNOKA DR	
CITY-ST-ZIP	CARROLLTON TX 75007	
TITLE	DPS	<input checked="" type="checkbox"/> Delete
NAME	SHORTRIDGE, STEVEN	
STREET ADDRESS	4056 PRINCETON ST	
CITY-ST-ZIP	FT MYERS FL 33901	
TITLE	DVPT	<input checked="" type="checkbox"/> Delete
NAME	MANINI, ROBERTO	
STREET ADDRESS	12380 MC GREGOR BLVD	
CITY-ST-ZIP	FORT MYERS FL 33901	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DPS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHORTRIDGE, STEPHEN	
STREET ADDRESS	4056 PRINCETON ST	
CITY-ST-ZIP	FT. MYERS, FL 33901	
TITLE	DVPT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANINI, ROBERTO	
STREET ADDRESS	12380 MCGREGOR BLVD	
CITY-ST-ZIP	FT. MYERS, FL 33901	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LANA YAIL	
STREET ADDRESS	1919-5 COURTNEY DR.	
CITY-ST-ZIP	FT. MYERS, FL 33901	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Stephen P. Shortridge

8-29-03 239-215-5683

CR2E037 (4/03)