

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

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90120 023 ****61.25

DOCUMENT # N38138

1. Entity Name
THE COURTYARD AT KINGS LAKE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**% NEWELL PROPERTY MANAGEMENT CORP.
5435 JAEGER RD. #4
NAPLES FL 34109
US**

Mailing Address
**% NEWELL PROPERTY MANAGEMENT CORP.
5435 JAEGER RD. #4
NAPLES FL 34109
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
**1044 Southwest Property Mgmt
Suite, Apt. #, etc.
1044 Castello Dr., #206
City & State
Naples, FL
Zip
34103
Country
USA**

3. Mailing Address
**1044 Southwest Property Mgmt
Suite, Apt. #, etc.
1044 Castello Dr., #206
City & State
Naples, FL
Zip
34103
Country
USA**

4. FEI Number **65-0180471** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**NEWELL, WILLIAM
4148A CORPORATE SQ
NAPLES FL 34104**

7. Name and Address of New Registered Agent
Name **Southwest Property Management Corp.**
Street Address (P.O. Box Number is Not Acceptable)
1044 Castello Dr., #206
City **Naples, FL** Zip Code **34103**

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 E. Williams** **STEPHEN E. WILLIAMS** **4/16/03**
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

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	STD	☐ Delete	TITLE	TD	☒ Change ☐ Addition
NAME	CHANDLER, MARK		NAME	Chandler, Mark	
STREET ADDRESS	1833 COURTYARD WAY E201		STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	SD	☒ Change ☐ Addition
NAME	SPEAKS, GROVENA		NAME	Speaks, Grovena	
STREET ADDRESS	1833 COURTYARD WAY #E103		STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP		
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	LAIRD, BOB		NAME		
STREET ADDRESS	1765 COURTYARD WAY #C205		STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	TODD, MILDRED		NAME		
STREET ADDRESS	1865 COURTYARD WAY F106		STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP		
TITLE	VD	☒ Delete	TITLE	D	☐ Change ☒ Addition
NAME	REDLES, RICH		NAME	Macasevich, Jeffrey	
STREET ADDRESS	1765 COURTYARD WAY C101		STREET ADDRESS	1701 COURTYARD WAY #A205	
CITY-ST-ZIP	NAPLES FL		CITY-ST-ZIP	NAPLES, FL 34112	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SWENSON, ROLAND		NAME		
STREET ADDRESS	1701 COURTYARD WAY #A102		STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34112		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: **Robert D. Williams** **REQUIRED**

CR2E037 (10/02)