

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N38431

1. Entity Name

ROOKERY BAY MAINTENANCE II, INC.

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90041 004 ****61.25

Principal Place of Business

Mailing Address

4400 EL CONQUISTADOR

PO BOX 10067

BRADENTON FL 34210

BRADENTON FL 34282

US

US

2. Principal Place of Business

3. Mailing Address

4400 El Conquistador

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bradenton FL

Zip

Country

Zip

Country

34210

US

4. FEI Number

65-0246090

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAGERTY, JOHN A
 4400 EL CON PKWY, #13
 BRADENTON FL 34205

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 KRAKE, KEN
 STREET ADDRESS 1369 PERICO POINTE CIR
 CITY-ST-ZIP BRADENTON FL

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD
 NAME HUBEL, GUNTER
 STREET ADDRESS 1361 PERICO POINTE CIRCLE
 CITY-ST-ZIP BRADENTON FL 34209

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD
 NAME BONE, WILLIAM J.
 STREET ADDRESS 1355 PERICO POINTE CIR
 CITY-ST-ZIP BRADENTON FL

TITLE D
 NAME Eileen Bunyon
 STREET ADDRESS 1385 Perico Pointe Cir
 CITY-ST-ZIP Bradenton FL 34209

TITLE DT
 NAME PARKS, DRUSILLA
 STREET ADDRESS 1375 PERICO POINTE CIRCLE
 CITY-ST-ZIP BRADENTON FL 34209

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DVP
 NAME SMITH, JEANNE
 STREET ADDRESS 1365 PERICO POINTE CIRCLE
 CITY-ST-ZIP BRADENTON FL 34209

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
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 CITY-ST-ZIP

TITLE
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)