2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2000 8:00 am
Secretary of State
03-14-2000 90025 046 ****61.25

DOCUMENT # N44347

1. Entity Name

SPANISH WELLS UNIT THREE HOMEOWNERS ASSOCIATION,

Principal Place of Business	Mailing Address
28000 SPANISH WELLS BLVD. BONITA SPRINGS FL 33923 US	P.O. BOX 84 BONITA SPRINGS FL 34133-0084 US

DO NOT WRITE IN THIS SPACE

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 65-0668274 ☐ 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
SEYMOUR, WILLIAM T. 28459 DEL LAGO WAY BONITA SPRINGS FL 33923	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HUFNAGEL, R 9825 AIHAMBRA LANE BONITA SPRINGS FL 34135	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HELLWEGE, RICHARD 9755 ALHAMBRA LANE BONITA SPRINGS FL 33923	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRAWFORD, J. STEPHEN 5129 CASTELLO DRIVE, SUITE 1 NAPLES FL 33940	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Janice Temanson 9837 Alhambra Lane Bonita Springs, Fl. 34135	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STARK, CALLUM 28524 SOMBRERO DRIVE BONITA SPRINGS FL 33923	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gerda Tocle 28487 Del Lago Way Bonita Springs, Fl. 34135	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SEYMOUR, JUDY 28459 DEL LAGO WAY BONITA SPRINGS FL 33923	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SEYMOUR, WILLIAM 28459 DEL LAGO WAY BONITA SPRINGS FL 33923	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: William T Seymour 3/23/00 941-495-6504
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #