2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2000 8:00 am Secretary of State **DOCUMENT # N44576** 1. Entity Name LAKESIDE AT BONITA BAY ASSOCIATION, INC. 02-01-2000 90116 006 ****61.25 Principal Place of Business Mailing Address 4081 BAYHEAD DRIVE 4081 BAYHEAD DRIVE APT 104 ひひひままひまみ **BONITA SPRINGS FL 34134** BONITA SPRINGS FL 34134-2676 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0335550 Not 4 Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **NELSON, SUE** 4081 BAY HEAD DRIVE 101 **BONITA SPRINGS FL 34134** Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Delete ☐ Change ☐ Addition TITLE PD TITLE NAME NAME NELSON, SUE STREET ADDRESS STREET ADDRESS 4081 BAYHEAD DRIVE #101 CITY-ST-ZIP CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Change ☐ Addition ☐ Delete TITLE TITLE VPD NAME KROPP, DOROTHY NAME STREET ADDRESS STREET ADDRESS 4081 BAYHEAD DRIVE #102 -CITY-ST-ZIP? CITY-ST-ZIP **BONITA SPRINGS FL 34134** Change ☐ Addition SD ☐ Delete TITLE TITLE NAME NAME gray, gerald STREET ADDRESS STREET ADDRESS 4001 WHISKEY POINTE LANE 101 CITY-ST-ZIP CITY-ST-ZIP BONITA SPRINGS FL 34134 VPD ₹ Change Addition Addition 🔀 Delete TITLE TITLE ROLL, ROBERT 4001 WHISKEY POINTE LANE # 202 NAME NAME WINCEK, VIRGINIA STREET ADDRESS STREET ADDRESS 4001 WHISKEY POINTE LANE, #201 BONITA SPRINGS FL 34134 CITY-ST-ZIE CITY-ST-ZIP <u>BONITA SPRINGS FL 34134</u> Change Addition TITLE ☐ Delete TITLE NAME THAELE, HARRO STREET ADDRESS STREET ADDRESS 4081 BAYHEAD DRIVE #104 CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS 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:

CITY-ST-ZIP

IRD MEDSINGUED NELSON PRES.