

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45858

1. Entity Name

BERMUDA GREENS COMMONS ASSOCIATION, INC.

FILED
Aug 23, 2000 8:00 am
Secretary of State

08-23-2000 90031 028 ****61.25

Principal Place of Business

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES FL 34104-518
US

Mailing Address

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES FL 34104-518
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0295569

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

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**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

R, & P PROPERT
265 AIRPORT ROAD SOUTH
NAPLES FL 34104-3518

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
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

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**\$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	PD MORANI, RENALD 13100 HAMILTON HARBOUR DR #G1 NAPLES FL 34110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SHEFFER, KENT 13131 HAMILTON HARBOUR DR.,#M2 NAPLES FL 34110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BACHTEL, JACK 13060 HAMILTON HARBOUR DR #H7 NAPLES FL 34110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WINO, GEORGE 13159 HAMILTON HARBOUR DR., #F12 NAPLES FL 34110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP REHM, FRANK 1613 BERMUDA GREENE BLVD.,#86 NAPLES FL 34110	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MOSER, PETER 13140 HAMILTON HARBOUR DR #F3 NAPLES FL 34110	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SNEFFER, KENT 13131 CASTLE HARBOUR #M2 NAPLES, FL 34110	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SMITHNISLER, JOSEPH 13101 HAMILTON HARBOUR #P3 NAPLES, FL 34110	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CLARKE, CHESTER 13141 HAMILTON HARBOUR #P9 NAPLES, FL 34110	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRECKENRIDGE, ARTHUR 13060 HAMILTON HARBOUR #H6 NAPLES, FL 34110	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HOLZHAUSEN, KURT 1651 BERMUDA GREENS BLVD. #C4 NAPLES, FL 34110	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 (5/00)