

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N48810

FILED  
Feb 14, 2003  
Secretary of State

**Entity Name:** THE OLDE HICKORY VERANDAS CONDOMINIUM II ASSOCIATION, INC.

## Current Principal Place of Business:

C/O PRIME MGMT GROUP  
9400 GLADIOLUS DR, #100  
FT MYERS, FL 33908 US

## New Principal Place of Business:

C/O BENSON'S, INC.  
12650 WHITEHALL DR  
FT MYERS, FL 33907 US

## Current Mailing Address:

9400 GLADIOLUS DR, #100  
FT. MYERS, FL 33908 US

## New Mailing Address:

C/O BENSON'S, INC.  
12650 WHITEHALL DR  
FT. MYERS, FL 33907 US

FEI Number: 65-0334646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ONEILL, ARLENE  
C/O PRIME MGMT GROUP  
9400 GLADIOLUS DR, #100  
FT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

BENSON, MARK  
C/O BENSON'S INC  
12650 WHITEHALL DR  
FT MYERS, FL 33907 US

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: MARK R. BENSON

02/14/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: VERALDI, JAMES  
Address: 14510 HICKORY HILL CT # 711  
City-St-Zip: FORT MYERS, FL 33912

Title: VD ( ) Delete  
Name: JEPSON, DAVID  
Address: 14510 HICKORY HILL CT #724  
City-St-Zip: FORT MYERS, FL 33912

Title: PD ( ) Delete  
Name: BUERSMEYER, JAMES  
Address: 14510 HICKORY HILL CT. #726  
City-St-Zip: FT MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DAVIES, CORA  
Address: 14511 HICKORY HILL CT #514  
City-St-Zip: FORT MYERS, FL 33912

Title: VD (X) Change ( ) Addition  
Name: HORNSBY, CARLOS  
Address: 14501 HICKORY HILLS CT #611  
City-St-Zip: FORT MYERS, FL 33912

Title: STD (X) Change ( ) Addition  
Name: BUERSMEYER, JAMES  
Address: 14510 HICKORY HILL CT. #726  
City-St-Zip: FT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORA DAVIES

PD

02/14/2003

Electronic Signature of Signing Officer or Director

Date