

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000001820

1. Entity Name

WEDGEWOOD-FOUNTAIN, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90071 042 ****61.25

Principal Place of Business

Mailing Address

13500 WORTHINGTON WAY
 BONITA SPRINGS FL 34135
 US

13500 WORTHINGTON WAY
 BONITA SPRINGS FL 34135-3476
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0405786

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

~~ICHOWITE FINGERS A~~
WORTHING COUNTRY CLUB
 13500 WORTHING WAY
 BONITA SPRINGS FL 34135

Name

MARK WEST

Street Address (P.O. Box Number is Not Acceptable)

WORTHINGTON COUNTRY CLUB

13500 WORTHINGTON WAY

City

Same, FL 34135

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

Mark West

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

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	MOYLAN, PATRICIA	
STREET ADDRESS	13500 WORTHINGTON WAY	
CITY-ST-ZIP	BONITA SPRINGS FL	
TITLE	DVF	<input checked="" type="checkbox"/> Delete
NAME	ZAGURSKY, JOSEPH	
STREET ADDRESS	13958 S. HAMPTON DR. 4302	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	DVS	<input checked="" type="checkbox"/> Delete
NAME	BUTLER, WILLIAM	
STREET ADDRESS	28024 CAVENDISH CT. #5303	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOOTH, ARNE	
STREET ADDRESS	13940 S. HAMPTON DR. #4003	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	QUARTANO, LARRY	
STREET ADDRESS	13928 S. HAMPTON DR. #3704	
CITY-ST-ZIP	BONITA SPRINGS FL 34135	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	LARRY QUARTANO		
STREET ADDRESS	13500 WORTHINGTON WAY		
CITY-ST-ZIP	BONITA SPRINGS, FL 34135		
TITLE	JPT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	VP/S	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ARTHUR STRATHMAN		
STREET ADDRESS	28028 CAVENDISH CT. 5402		
CITY-ST-ZIP	BONITA SPRINGS, FL 34135		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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:

Arthur Strathman
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/5/00 941-495-0244

CR2E037 (9/99)