

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90134 018 ****61.25

DOCUMENT # N94000000724

1. Entity Name

OLDE HICKORY VILLAS CONDOMINIUM III ASSOCIATION, INC.

Principal Place of Business

9411 CYPRESS LAKE DRIVE
STE 2
FORT MYERS FL 33919
US

Mailing Address

9411 CYPRESS LAKE DRIVE
STE 2
FORT MYERS FL 33919
US

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

65-0470770

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

W.W. SCHOO MANAGEMENT, INC
9411 CYPRESS LAKE DR
STE 2
FORT MYERS FL 33919

Name

Bryan Cruz

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

W.W. Schoo Management, Inc.

9411-2 Cypress Lake Drive

City

Fort Myers

FL

Zip Code
33919

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 re-electing)

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 **VD** ☒ Delete
NAME **WEBB, MICHAEL**
STREET ADDRESS **14150 HICKORY MARSH LN #104**
CITY-ST-ZIP **FORT MYERS FL 33912**

TITLE **P/D** ☐ Change ☒ Addition
NAME **Roush, Gene**
STREET ADDRESS **14000 Hickory Marsh Lane, Villa 75**
CITY-ST-ZIP **Fort Myers, FL 33912**

TITLE **STD** ☐ Delete
NAME **DILLY, CORET**
STREET ADDRESS **14050 HICKORY AMRSH LANE # 85**
CITY-ST-ZIP **FORT MYERS FL 33912**

TITLE **S/T/D** ☒ Change ☐ Addition
NAME **Mary Ellen Covert**
STREET ADDRESS **14050 Hickory Marsh Lane, Villa 85**
CITY-ST-ZIP **Fort Myers, FL 33912**

TITLE **PD** ☒ Delete
NAME **YOUNG, DON**
STREET ADDRESS **14150 HICKORY-MARSH LANE # 105**
CITY-ST-ZIP **FORT MYERS FL 33912**

TITLE **V/D** ☐ Change ☒ Addition
NAME **Willaim D Sebastian**
STREET ADDRESS **14200 Hickory Marsh Lane, Villa 116**
CITY-ST-ZIP **Fort Myers, FL 33912**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)