

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0051514

DOCUMENT # N94000004181

1. Entity Name

THE OLDE HICKORY VERANDAS CONDOMINIUM V ASSOCIATION, INC.



FILED

03 MAY -1 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

C/O HENKE PROPERTY MNGT
6213-A PRESIDENTIAL CT
FORT MYERS FL 33919
US

Mailing Address

C/O HENKE PROPERTY MNGT
6213-A PRESIDENTIAL CT
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 65-0522397

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HENKE, CAROL J
% HENKE PROPERTY MANAGEMENT
6213-A PRESIDENTIAL CT
FORT MYERS FL 33919

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. I am familiar with, and accept the obligations of registered agent.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE STD
NAME SEIBERT, JOANNE
STREET ADDRESS 14301 HICKORY LINKS CT, STE 1625
CITY-ST-ZIP FT MYERS FL 33912 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800017849768
CITY-ST-ZIP 05/01/03--01033--018 **\$61.25

TITLE VPD
NAME MITCHELL, WILLIAM
STREET ADDRESS 14310 HICKORY LINKS CT. #1715
CITY-ST-ZIP FT. MYERS FL 33912 ☐ Delete

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

TITLE PD
NAME SCHAD, REX A.
STREET ADDRESS 14310 HICKORY LINKS CT. #1712
CITY-ST-ZIP FT. MYERS FL 33912 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ 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:

Rex A. Schad
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/2003 239-561-3760
Date Daytime Phone #

CR2E037 (10/02)