

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002051

1. Entity Name

BOBCAT VILLAS HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90064 043 ****61.25

00022808

DO NOT WRITE IN THIS SPACE

Principal Place of Business
6324 N. Cranberry Blvd
North Port, FL 34286

Mailing Address
6324 N. Cranberry Blvd
North Port, FL 34286

2. Principal Place of Business
2001 Lynx Run

3. Mailing Address
2001 Lynx Run

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
North Port, FL

City & State
North Port, FL

4. FEI Number
59-3566150

Applied For
Not Applicable

Zip
34286

Country

Zip
34286

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Bobcat Villas, Inc.
6324 N. Cranberry Blvd
North Port, FL 34286

7. Name and Address of New Registered Agent

Name
Scott W. Dunlap
Street Address (P.O. Box Number is Not Acceptable)
22 South Links Avenue, Suite 300
City
Sarasota FL Zip Code
34236

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

2-21-01

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
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
Maynell, Jay
6324 N. Cranberry Blvd
North Port, FL 34286

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
Griggs, Larry C.
6324 N. Cranberry Blvd
North Port, FL 34286

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TS
Hinojosa, Elizabeth
6324 N. Cranberry Blvd
North Port, FL 34286

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
Richard Solano
2001 Lynx Run
North Port, FL 34286

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
W. Todd Menke
2001 Lynx Run
North Port, FL 34286

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TS
William Turcotte
2001 Lynx Run
North Port, FL 34286

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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:

W. Todd Menke, Director

Date

Daytime Phone #

2/21/01

941-429-8400

CR2E037 (11/00)