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2001 UNIFORM BUSINESS REPORT (UBR)				FILED Sep 06, 2001 8:00 am Secretary of State					
DOCUMENT # N9800007103 1. Entity Name									
AWRJV	OWNERS' ASSOCIATION, INC			\wedge		9-06-2001 90259 03			
			- (, 00 2001 70237 03	2 01.2		
Principal Pla	ce of Business	Mailing Address		y					
	TRO PARKWAY	11000-27 METRO PARKWAY	r						
FORT MYERS	6 FL 33912	FORT MYERS FL 33912			1	may the same	JAF		
								4810 (9) (\$B)	
	Place of Business O A Plantation Rd	3. Mailing Address	antation	RJ					
Suite, Apt		Suite, Apt. #, etc.	arriver ibje	.) ()		DO NOT WRITE IN THIS	SPACE		
City & Sta	to	City & Chata				. ಎಂ ಭಾರತಾ	<u>ئىمىسىمى</u> ئالىل	-جيءبستين	
Fort	MUERSIFL	City & State Fort Mey	ers, Fi	<u> </u>	4. FEI Number	55-1009064		oplied For ot Applicable	-
3391	Country	Zip 22015	Country	~~	5. Certificate of St	tatus Desired	\$8.75 Add	ditional	1
<u> </u>	6. Name and Address of Current Re	egistered Agent		€	·	iress of New Registered	Fee Require	d	-
ļ		<u> </u>	Name				Agoni		1
Hiss 14LL	EN L		Street	Address (I	P.O. Box Number is	Not Acceptable)			1
	PLANTATION ROAD								┨
FURIMY	'ER\$ FL 33912		City				Zip Code		-
9 The chave						FL	- Zip Codi	 -	1
o. The above	e named entity submits this statement for th	ne purpose of changing its re	egistered office o	or register	ed agent, or both, in	the state of Florida.			
0.01.47.155									
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signa	ture required	when reinstating)	DATE			
									┨.
	FILE NOW: FEE IS \$61.25 ember 12, 2001, min. will be \$236	9. Election Camp 3.25 Trust Fund Co			\$5.00 May Be Added to Fees	Make Chec	k Payable t		
TITLE	OFFICERS AND DIREC	CTORS Delete	11.	A	DDITIONS/CHANG	ES TO OFFICERS AND DI]_
NAME	RIVERS, SCOTT	L Detete	NAME	27	09 Solyl	Clos. Isu	Change	☐ Addition	(5/0
STREET ADDRESS CITY-ST-ZIP	11000-27 METRO PARKWAY		STREET ADDRESS		1 E X	Luz Loop M 87505			037
TITLE	FORT MYERS FL 33912	☐ Delete	CITY-ST-ZIP		LARIE N	110 8 1900	Change		CR2E037 (5/01)
NAME	"RIVERS, BROOKSY Q	Delete	NAME	27	09 550	Thuz Loop	LA Change	Addition	0
STREET ADDRESS CITY-ST-ZIP	11000-27 METRO PARKWAY FORT MYERS FL 33912		STREET ADDRESS CITY-ST-ZIP	_	nta FE	•			
TITLE	VSD	□ Delete	TITLE		101016	14/1C 8100	<u> </u>	☐ Addition	->
NAME	HILL, ALLEN		NAME				Onlings	Addition	
STREET ADDRESS I	11850-A PLANTATION ROAD FORT MYERS FL 33912		STREET ADDRESS CITY-ST-ZIP						
TITLE	7 5.11 10112110 12 00012	☐ Delete	TITLE	<u> </u>			Change	☐ Addition	
NAME			NAME				□ Outuing€		
STREET ADDRESS CITY-ST-ZIP		,	STREET ADDRESS CITY-ST-ZIP						·
TITLE	<u> </u>	☐ Delete	ŢITLE		······		☐ Change	Addition	
NAME STREET ADDRESS			NAME			•			
CITY-ST-ZIP	1		STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Delete

DISCUSTION RECLURED SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

8/28/01

☐ Change

☐ Addition