

2000 UNIFORM BUSINESS REPORT (UBR)

0068478

DOCUMENT # N99000001483

1. Entity Name

THE BOLERO III AT TIBURON CONDOMINIUM ASSOCIATIO

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 11 AM 9:59

Principal Place of Business

Mailing Address

24301 WALDEN CENTER DR., SUITE 300
BONITA SPRINGS FL 34134

24301 WALDEN CENTER DR., SUITE 300
BONITA SPRINGS FL 34134-4920

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0904059

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HASTINGS, VIVIAN N
24301 WALDEN CENTER DR., SUITE 300
BONITA SPRINGS FL 34134

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME BAILEY, DENNIS
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE DP ☐ Change ☒ Addition
NAME Timothy Oak
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134

TITLE VD ☐ Delete
NAME GREENBERG, MICHAEL
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE DVP/S ☐ Change ☒ Addition
NAME Kenneth W. Hayden
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134

TITLE VSD ☒ Delete
NAME FLINN, MILTON G
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE T ☐ Change ☒ Addition
NAME Dustin Travis
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134

TITLE T ☒ Delete
NAME GUIDO, PHILIP
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE D ☐ Change ☒ Addition
NAME Kelli Eastman
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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.

KENNETH W. HAYDEN

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941.498 8620

CR2E037 (9/99)