

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002184

1. Entity Name

GULF HARBOUR GOLF & COUNTRY CLUB, INC.

Principal Place of Business

24301 WALDEN CENTER DR.
BONITA SPRINGS FL 34134

Mailing Address

24301 WALDEN CENTER DR.
BONITA SPRINGS FL 34134

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0924265

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

HASTINGS, VIVEN ESQ.
24301 WALDEN CENTER DR.
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 | DP | <input type="checkbox"/> Delete |
| NAME | D'ALESSANDRO, EDWARD | |
| STREET ADDRESS | 24301 WALDEN CENTER DR. | |
| CITY-ST-ZIP | BONITA SPRINGS FL 34134 | |
| TITLE | DV | <input type="checkbox"/> Delete |
| NAME | NEWMAN, RICHARD G | |
| STREET ADDRESS | 24301 WALDEN CENTER DR. | |
| CITY-ST-ZIP | BONITA SPRINGS FL 34134 | |
| TITLE | DST | <input type="checkbox"/> Delete |
| NAME | SEURATTAN, RUDY | |
| STREET ADDRESS | 24301 WALDEN CENTER DR. | |
| CITY-ST-ZIP | BONITA SPRINGS FL 34134 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|-------------------------|--|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | DeVries, Russell | |
| STREET ADDRESS | 14500 Vista River Drive | |
| CITY-ST-ZIP | Fort Myers, FL 33908 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Caroselli, Frank | |
| STREET ADDRESS | 14500 Vista River Drive | |
| CITY-ST-ZIP | Fort Myers, FL 33908 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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.

Rudy Seurattan, Secretary

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/02

(941) 927-2600

Date

Daytime Phone #

CR2E037 (9/01)

WCI

COMMUNITIES, INC.

ATTACHMENT Doc# : N99000002184

347959

24301 WALDEN CENTER DR.

BONITA SPRINGS,

FLORIDA 34134

TEL (941) 947-2600

wcicommunities.com

March 13, 2002

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, Florida 32302-1500

Re: Annual Reports

Enclosed are the 2002 Uniform Business Reports for Gulf Harbour Golf & Country Club, Inc., along with our check in the amount of \$61.25 as the filing fee for this corporation.

Should you have any questions please do not hesitate to contact me at (941) 498-8605.

Sincerely,



Bonnie Rushing
Paralegal

/bdr

Enclosures