## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** May 12, 2001 8:00 am<sup>3</sup> Secretary of State DOCUMENT # N99000002653 1. Entity Name AUTUMN LAKE SECTION II CONDOMINIUM ASSOCIATION, 05-12-2001 90049 028 \*\*\*\*61.25 Principal Place of Business Mailing Address C/O PULTE HOME CORPORATION C/O PULTE HOME CORPORATION 9220 BONITA BEACH RD. SUITE 215 9220 BONITA BEACH RD. SUITE 215 BONITA SPRINGS FL 34135 **BONITA SPRINGS FL 34135** 3. Mailing Address 2. Principal Place of Business SUNTEGRATED PROPERTY MGMT INTEGRATED PROPERTY MGMT DO NOT WRITE IN THIS SPACE 3435 10th St N - Suite 201 3435 10th St N - Suite 201 4. FEI Number Applied For City & State Naples FL 34103 Naples FL 34103 65-1007427 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Scott Hennells Street Address (P.O. Box Number is Not Acceptable) Weibel # Hennells WOLPERT, GREG G C/O PULTE HOME CORPORATION 9240 Bonita Bch. Rd. #3305 9220 BONITA BEACH RD, SUITE 215 **BONITA SPRINGS FL 34135** onita Springs 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both with the state of Florida. Scott D. Hennells Signature, typed or printed name of registered agent and title if applicable

FILE	E NO	W:
FFF :	IS \$6	1.25

9. Election Campaign Financing

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

FEE IS \$61.25 Trust Fund Contributi		on. Added to Fees		Department of State		
10.	10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD	Delete	TITLE	P/D	☐ Change	🔀 Addition
NAME	WOLPERT, GREG G	,	NAME	SULLIVAN, JAM	IES	
STREET ADDRESS	9220 BONITA BEACH RD, SUITE 21	5	STREET ADDRESS	SULLIVAN, JAM 23536 Sandycre	ek Terrace	\
CITY-ST-ZIP	BONITA SPRINGS FL 34135		CITY-ST-ZIP	Bonita Springs,		
TITLE	STD	🙇 Delete	TITLE	V/D	☐ Change	Addition
NAME	MEEKS, W MICHAEL	`	NAME	GRECO, LOUIS		
STREET ADDRESS	9220 BONITA BEACH RD, SUITE 21	5	STREET ADDRESS	23531 Sandycre	ek Terrace	
_CITY-ST-ZIP_	_BONITA SPRINGS FL 34135		CITY-ST-ZIP	Bonita Springs		
TITLE	VD	<b>⊠</b> _Delete	TITLE	S/T/D	☐ Change	🕰 Addition
NAME	GRIFFITH, R SCOTT		NAME	LOMBARD, ROA	4	
STREET ADDRESS	9220 BONITA BEACH RD, SUITE 21	5	STREET ADDRESS	23531 Sandycres	K Terrace	
CITY-ST-ZIP	BONITA SPRINGS FL 34135		CITY-ST-ZIP	Bonita Springs	FC	
TITLE		☐ Delete	TITLE	AS	☐ Change	Addition
NAME			NAME	BECHTEL, RICK		ĺ
STREET ADDRESS			STREET ADDRESS	3435-104 St. N. #	201	
CITY-ST-ZIP			CITY-ST-ZIP	Naples, FL 34103	,	
TITLE		☐ Delete	TITLE		Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			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 empewered 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 accuracy with all other like empowered.

SIGNATURE:

RICK BECHTEL