

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90063 039 ****61.25

DOCUMENT # N99000003035

1. Entity Name

WILLOW BROOK AT PARKER LAKES II CONDOMINIUM ASSO
CIATION, INC.

Principal Place of Business

Mailing Address

~~GLADIOLUS DRIVE~~
~~100~~
~~MYERS FL 33908~~

~~9400 GLADIOLUS DRIVE~~
~~SUITE 100~~
~~FORT MYERS FL 33908~~

Cl P+m Property Management

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

15660 San Carlos Blvd #40

15660 San Carlos Blvd. #40

City & State
FT. MYERS, FL

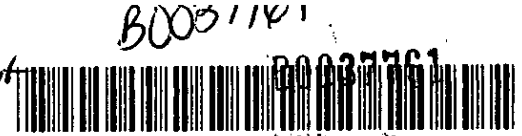
City & State
FT. MYERS, FL

Zip
33908

Country
USA

Zip
33908

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0842955

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

~~O'NEILL, ARLENE~~
~~9400 GLADIOLUS DRIVE~~
~~STE 100~~
~~FORT MYERS FL 33919~~

Name
LORI ANN AYERS

Street Address (P.O. Box Number is Not Acceptable)
15660 San Carlos Blvd. #40

City
FT. MYERS

FL

Zip Code
33908

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 *Lori Ann Ayers* *Lori Ann AYERS, MANAGER* *1/21/02*
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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
HENNESSY, CLAUDIA A
14550 DAFFODIL DRIVE, #1004
FORT MYERS FL 33919 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
15660 San Carlos Blvd. #40
FT. MYERS, FL 33908

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
PERRY, ROBIN W
14500 DAFFODIL DRIVE, #1103
FORT MYERS FL 33919 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
15660 San Carlos Blvd. #40
FT. MYERS, FL 33908

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
FOX, MARY ALICE
14500 DAFFODIL DRIVE, #1102
FORT MYERS FL 33919 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
15660 San Carlos Blvd. #40
FT. MYERS, FL 33908

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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 *Lori Ann Ayers* *Lori Ann AYERS, MANAGER* *1/21/02* *(941) 481-1577*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)