

2000 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 09, 2000 8:00 am
Secretary of State

03-27-2000 90067 033 ****61.25

DOCUMENT # N99000005019

1. Entity Name

LITTLE HICKORY BAY AQUATIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4835 BONITA BEACH RD., #210
 BONITA SPRINGS FL 34134

4835 BONITA BEACH RD., #210
 BONITA SPRINGS FL 34134-3969

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SWALM, MURRELL & SAMOUCÉ, P.A.
 2375 TAMiami TRAIL NORTH, STE. 308
 NAPLES FL 34103

7. Name and Address of New Registered Agent

Name **DONALD R BUENNAGEL**

Street Address (P.O. Box Number is Not Acceptable)
4835 BONITA BEACH RD

#210

City **BONITA SPRINGS**

FL

Zip Code **34134**

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

Donald R Buennagel

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

TITLE **D** ☐ Delete
 NAME **WELDEN, WAYNE V**
 STREET ADDRESS **4835 BONITA BEACH RD., #204**
 CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **D** ☐ Delete
 NAME **ELLSWORTH, MOORE**
 STREET ADDRESS **4835 BONITA BEACH RD., #205**
 CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **D** ☐ Delete
 NAME **SCOTT, ERNEST**
 STREET ADDRESS **4835 BONITA BEACH RD., #109**
 CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **D** ☐ Delete
 NAME **THOMAS, DEBOER**
 STREET ADDRESS **4835 BONITA BEACH RD., #602**
 CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **D** ☐ Delete
 NAME **KWAIT, ROBERT**
 STREET ADDRESS **10561 WOOD IBIS AVE.**
 CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VICE PRESIDENT** ☒ Change ☐ Addition
 NAME **Welden, Wayne D**
 STREET ADDRESS **4835 BONITA BEACH RD #204**
 CITY-ST-ZIP **BONITA SPRINGS, FL 34134**

TITLE **VICE PRESIDENT** ☒ Change ☐ Addition
 NAME **ELSWORTH, MOORE D**
 STREET ADDRESS **4835 BONITA BEACH RD #205**
 CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **PRESIDENT** ☒ Change ☐ Addition
 NAME **SCOTT, ERNEST D**
 STREET ADDRESS **4835 BONITA BEACH RD #109**
 CITY-ST-ZIP

TITLE **SECRETARY** ☒ Change ☐ Addition
 NAME **DEBOER, THOMAS D**
 STREET ADDRESS **4835 BONITA BEACH RD #502**
 CITY-ST-ZIP **BONITA SPRINGS, FL 34134**

TITLE **TREASURER** ☒ Change ☐ Addition
 NAME **KWAIT, ROBERT D**
 STREET ADDRESS **4835 BONITA BEACH RD #104**
 CITY-ST-ZIP **BONITA SPRINGS, FL 34134**

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 this filing, with all other like information.

SIGNATURE:

Donald R Buennagel
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)