

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90049 023 ****61.25

DOCUMENT # N99000005537

1. Entity Name

AUTUMN LAKE SECTION III CONDOMINIUM ASSOCIATION,

Principal Place of Business

C/O PULTE HOME CORPORATION
 9220 BONITA BEACH ROAD #215
 BONITA SPRINGS FL 34135

Mailing Address

C/O PULTE HOME CORPORATION
 9220 BONITA BEACH ROAD #215
 BONITA SPRINGS FL 34135

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

INTEGRATED PROPERTY MGMT
 City & State
3435 10th St N - Suite 201

Zip **Naples FL 34103**

INTEGRATED PROPERTY MGMT
 City & State
3435 10th St N - Suite 201

Zip **Naples FL 34103**

4. FEI Number

59-3631747

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WOLPERT, GREG G
 C/O PULTE HOME CORPORATION
 9220 BONITA BEACH ROAD #215
 BONITA SPRINGS FL 34135

7. Name and Address of New Registered Agent

Name

Scott Hennells

Street Address (P.O. Box Number is Not Acceptable)

Weibel & Hennells

9240 Bonita Beach Rd, #3305

City

Bonita Springs

FL

Zip Code

34135

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

Scott D. Hennells

SCOTT D. HENNELLS

4/25/01

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 **PD** ☒ Delete
 NAME **WOLPERT, GREG G**
 STREET ADDRESS **C/O 9220 BONITA BEACH ROAD #215**
 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE **STD** ☒ Delete
 NAME **W. MICHAEL MEEKS**
 STREET ADDRESS **C/O 9220 BONITA BEACH ROAD #215**
 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE **VD** ☒ Delete
 NAME **R. SCOTT GRIFFITH**
 STREET ADDRESS **C/O 9220 BONITA BEACH ROAD #215**
 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
 NAME **KELSEY, JERRY**
 STREET ADDRESS **23551 Sandycreek Terrace**
 CITY-ST-ZIP **Bonita Springs, FL**

TITLE **D** ☐ Change ☒ Addition
 NAME **KOLAVO, FRANK**
 STREET ADDRESS **23551 Sandycreek Terrace**
 CITY-ST-ZIP **Bonita Springs, FL**

TITLE **DIP** ☐ Change ☒ Addition
 NAME **MINNIE, DON**
 STREET ADDRESS **23541 Sandycreek Terrace**
 CITY-ST-ZIP **Bonita Springs, FL**

TITLE **AS** ☐ Change ☒ Addition
 NAME **BECHTEL, RICK**
 STREET ADDRESS **3435-10th St. N., #201**
 CITY-ST-ZIP **Naples, FL 34103**

TITLE ☐ Change ☐ Addition
 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 an other title empowered.

SIGNATURE:

Rick Bechtel

RICK BECHTEL

4/24/01 941-434-7447

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)