

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006064

1. Entity Name

WCI COMMUNITIES/MERCEDES BENZ OF FORT MYERS JUNI

**FILED**  
**Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90516 001 \*\*\*367.50

Principal Place of Business

Mailing Address

24301 WALDEN CENTER DRIVE  
BONITA SPRINGS FL 34134

24301 WALDEN CENTER DRIVE  
BONITA SPRINGS FL 34134-4920

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  
59-3609219

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HASTINGS, VIVIAN N  
24301 WALDEN CENTER DRIVE  
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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FRY, DAVID L  
24301 WALDEN CENTER DRIVE  
BONITA SPRINGS FL 34134 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
David E. Fry  
24301 Walden Center Drive  
Bonita Springs, FL 34134 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MATTHEWS, RAYMOND  
24301 WALDEN CENTER DRIVE  
BONITA SPRINGS FL 34134 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
Raymond Matthews  
24301 Walden Center Drive  
Bonita Springs, FL 34134 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WEBER, EDWARD J  
24301 WALDEN CENTER DRIVE  
BONITA SPRINGS FL 34134 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DST  
Edward J. Weber  
24301 Walden Center Drive  
Bonita Springs, FL 34134 ☒ Change ☐ Addition

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  
NAME  
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:

**SIGNATURE REQUIRED**

David L. Fry, Director 941-947-2600 4/11/00

Date

Daytime Phone #

CR2E037 (9/99)