

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006139

1. Entity Name

SEMINOLE LAKES RESIDENTS GROUP, INC.

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90046 028 ****61.25

Principal Place of Business

Mailing Address

10334 WINDSONG RD.
PUNTA GORDA FL 33955

10334 WINDSONG RD.
PUNTA GORDA FL 33955-4737

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

65-0963453

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

DOLAN, ROBERT F
10334 WINDSONG RD.
PUNTA GORDA FL 33955

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 ☐ Delete
NAME D
STREET ADDRESS DOLAN, ROBERT F
CITY-ST-ZIP 10334 WINDSONG RD.
PUNTA GORDA FL 33955

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

TITLE ☐ Delete
NAME D
STREET ADDRESS CHENEY, JULIAN
CITY-ST-ZIP 26233 SEMINOLE LAKES BLVD.
PUNTA GORDA FL 33955

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

TITLE ☐ Delete
NAME D
STREET ADDRESS TOTH, ROBERT
CITY-ST-ZIP 26201 STILLWATER CIR.
PUNTA GORDA FL 33955

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

TITLE ☐ Delete
NAME D
STREET ADDRESS COTYK, ROBERT
CITY-ST-ZIP 26461 FEATHERSOUND DR.
PUNTA GORDA FL 33955

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

TITLE ☐ Delete
NAME D
STREET ADDRESS GURNEY, SHIRLEY
CITY-ST-ZIP 26430 FEATHERSOUND DR.
PUNTA GORDA FL 33955

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

TITLE ☐ Delete
NAME D
STREET ADDRESS BURGET, RICHARD
CITY-ST-ZIP 26118 STILLWATER CIR.
PUNTA GORDA FL 33955

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 provided in 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 has 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**SIGN
HERE**

Feb 8, 2000 941-505-0881