## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Aug 07, 2001 8:00 am Secretary of State DOCUMENT # N9900007180 1. Entity Name TERRACE IV AT LAKESIDE GREENS ASSOCIATION, INC. 08-07-2001 90010 035 \*\*\*\*61.25 Mailing Address Principal Place of Business 10060 AMBERWOOD ROAD.. #4 10060 AMBERWOOD ROAD., #4 FORT MYERS FL 33913 FORT MYERS FL 33913 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEi Number City & State 65-0945772 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name a dden Street Address (P.O. Box Number is Not Acceptable) GELLES, BOB % GULF COAST MANAGEMENT SERVICES **Gulf Coast Management** 10060 AMBERWOOD ROAD., #4 Services, Inc. Zip Code City FORT MYERS FL 33913 10060 Amberwood Rd. Suite 4 Ft. Myers, FL 33913 8. The above named entity submits this statement for the purpose of changing its registered office of SIGNATURE DATE title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. DPHAMMONS, LINDA Change Addition 8076 QUEEN DALM # 446 Delete TITLE TITLE BENSON, STEVE NAME NAME 10481 SIX MILE CYPRESS PARKWAY STREET ADDRESS FYMYERS, FL 33912 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33912 ☐ Change ☐ Addition VD TITLE BOWERS RICHARD 1= 428 **GRIMES, JOSEPH** NAME NAME 10481 SIX MILE CYPRESS PARKWAY STREET ADDRESS STREET ADDRESS FIMYER STFW 339125 CITY ST-ZIP CITY-ST-ZIP FORT MYERS FL 33912 ☐ Change ☐ Addition STD Delete TITLE 8076 QUEEN DALM H 415 BURNS, ALAN NAME NAME 10481 SIX MILE CYPRESS PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FI MYERS FN 33912 FORT MYERS FL 33912 CITY-ST-ZIP ☐ Change Addition TITLE □ Delete SIEARU Ames 8016 Queen Palmet 432 Ft. Myers FL. 33912 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CATA RUSSO, JOSEPH Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS Ft.Myers FL. 33912 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

RECUMPED SIGNATURE

CITY-ST-ZIP