2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State
05-23-2001 90227 036 ***150.00

DOCUMENT # P00000032600

1. Entity Name
COLONY AT BARRAGAN Rd. INC.

Principal Place of Business
7255-2 BARRAGAN RD.
FT. MYERS FL. 33912

Mailing Address
SAME

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
ABOVE
Suite, Apt. # etc
City & State
Zip | Country

3. Mailing Address
ABOVE
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number
000000326 | 65-1114926
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SPIEGEL + UTRERA P.A.
343 ALMERIA AVE.
CORAL GABLES, FL 33134
305 860 1600

7. Name and Address of New Registered Agent
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back). ☐
FILE NOW!! After MAY 1, 200 Make Check Payabl
FEE IS $150.00 Fee will be $550.00 to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOSEPH E TWOMEY 7255-1 BARRAGAN RD FT. MYERS FL. 33912	☐ Delete	TITLE PRES NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOAN TWOMEY 7255-3 BARRAGAN Rd FT. MYERS FL. 33912	☐ Delete	TITLE V.P. NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GLORIA Mc GRORY 7255-2 BARRAGAN Rd. FT. MYERS FL. 33912	☐ Delete	TITLE T-S NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	WILLIAM HANSEN 7255-4 BARRAGAN Rd. FT. MYERS FL. 33912	☒ Delete	TITLE V.P. NAME STREET ADDRESS CITY-ST-ZIP	JACOB HANSEN 7255-4 BARRAGAN Rd. FT. MYERS FL. 33912	☒ 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

CR2E034 (11/00)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph E. Twomey — 4-23-01 — 941-267-7637
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #