2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

FILED Mar 20, 2001 8:00 am DOCUMENT # P97000083332 **Secretary of State** SYNERGY GOLF DEVELOPMENT, INC. 03-20-2001 90064 012 ***150.00 Principal Place of Business Mailing Address 26811 S. BAY DR. 26811 S. BAY DR. STE 240 STE 240 00027089 BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0805970 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CECIL, W J Street Address (P.O. Box Number is Not Acceptable) 5801 PELICAN BAY BLVD **STE 300** NAPLES FL 34108 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Change ☐ Addition TITI E TITLE ☐ Delete FIELDS, JAMES J NAME NAME 2039 MISSION DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34109 ☐ Addition Change TITLE ☐ Delete TITLE KRYSTOPOWICZ, WILLIAM J NAME NAME STREET ADDRESS 205 PRESWILK PARK DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEWNAKS GA 30245** ☐ Addition → □ Change TITLE ☐ Delete TITLE ROSINUS, FRANZ J NAME NAME 25151 PENNYROYAL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** ☐ Change ☐ Addition TITLE □ Delete TITLE ROSS, JOHANNES NAME NAME **ESERNTALSTRASSE 374** STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP D-57080 FED. REP. OF GERMANY TITLE ☐ Delete TITLE Change ☐ Addition GLAS, KONRAD NAME NAME STREET ADDRESS POSSENHOFEN STREET ADDRESS CITY-ST-ZIP D-57080 FED. REP. OF GERMANY CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE EBENHOEH, JUERGEN NAME NAME STREET ADDRESS 1190 BAY DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANIBEL FL 33957 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