

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000098403

1. Entity Name  
**BATEMAN COMMUNITIES OF S.W. FLORIDA, INC.**

**FILED**  
**Apr 02, 2001 8:00 am**  
**Secretary of State**

04-02-2001 90312 021 \*\*\*150.00

Principal Place of Business

**4375 DOVER CT  
SUITE #102  
NAPLES FL 34105  
US**

Mailing Address

**4375 DOVER CT  
SUITE #102  
NAPLES FL 34105  
US**

640580



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**4771 Alberton Court**

3. Mailing Address

**4771 Alberton Court**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**#3502**

**#3502**

City & State

City & State

**Naples, FL**

**Naples, FL**

Zip

Country

Zip

Country

**34105**

**USA**

**34105**

**USA**

4. FEI Number **65-0797254**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BATEMAN, ARTHUR L  
4375 DOVER COURT  
#102  
NAPLES FL 34105**

7. Name and Address of New Registered Agent

Name

**Bateman, Arthur L.**

Street Address (P.O. Box Number is Not Acceptable)

**4771 Alberton Court, #3502**

City  
**Naples**

**FL**

Zip Code  
**34105**

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
BATEMAN ARTHUR L  
4375 DOVER CT STE #102  
NAPLES FL 34105** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Versch... J  
DERSCH, JOYCE  
4445 Dover Ct. #803  
Naples, FL 34105** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
Bateman, Arthur L.  
4771 Alberton Court, #3502  
Naples, FL 34105** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
DERSCH, JOYCE  
4445 Dover Ct. #803  
Naples, FL 34105** ☐ Change ☒ Addition

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**3-30-01**

**341-430-1012**

CR2E034 (10/00)