

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0588434 AV

DOCUMENT # P97000100254

1. Entity Name  
CENTURY DEVELOPMENT OF COLLIER COUNTY, INC.



FILED

03 APR 28 PM 2:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
1061 COLLIER CENTER WAY  
SUITE 5  
NAPLES FL 34110

Mailing Address  
1061 COLLIER CENTER WAY  
SUITE 5  
NAPLES FL 34110

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3478877

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LESTER, DON E  
1061 COLLIER CENTER WAY  
SUITE 5  
NAPLES FL 34110

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
LESTER, DEAN C  
9927 KONA ISLE CT.  
ORLANDO FL 32817 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
500016970805  
04/24/03--01077--024 \*\*150.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
ST  
LESTER, SUZANNE F  
4888 OAKLEAF  
NAPLES FL 34110 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
1061 Collier Center Way, Ste. 5  
Naples, FL 34110 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
WICKLIFFE, CHARLES D  
27056 JARVIS ROAD  
BONITA SPRINGS FL 34135 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
LESTER, DON E  
4888 OAKLEAF  
NAPLES FL 34110 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
1061 Collier Center Way, Ste. 5  
Naples, FL 34110 ☒ 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

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 607, 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)