

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90037 022 ***150.00

DOCUMENT # P98000002833

1. Entity Name

ARTHUR DAVIS COMMUNITIES, INC.

Principal Place of Business

**2403 TRADE CENTER WAY
STE 6
NAPLES FL 34109**

Mailing Address

**2403 TRADE CENTER WAY
STE 6
NAPLES FL 34109**

2. Principal Place of Business

4103 Tamiami Trail E.

3. Mailing Address

4103 Tamiami Trail E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number **59-3486845**

Applied For

Not Applicable

Zip

34109

Country

USA

Zip

34109

Country

USA

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

**BRUGGER, JOHN N
600 FIFTH AVENUE SOUTH STE. 207
NAPLES FL 34102**

Name **Arthur G. Davis**

Street Address (P.O. Box Number is Not Acceptable)
2116 Mission Drive

City **Naples, FL**

FL

Zip Code
34109

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

Arthur G. Davis

JAN 8, 2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Delete
NAME **BRUGGER, JOHN N**
STREET ADDRESS **211 SHARWOOD DRIVE**
CITY-ST-ZIP **NAPLES FL 34110**

TITLE **CEO, P,S,T,D** ☒ Change ☐ Addition
NAME **Arthur G. Davis**
STREET ADDRESS **2116 Mission Drive**
CITY-ST-ZIP **Naples, FL 34109**

TITLE **DAS** ☒ Delete
NAME **BRUGGER, CAROL R**
STREET ADDRESS **211 SHARWOOD DRIVE**
CITY-ST-ZIP **NAPLES FL 34110**

TITLE **VP** ☐ Change ☒ Addition
NAME **Eric Stier**
STREET ADDRESS **6762 Buckingham Court**
CITY-ST-ZIP **Naples, FL 34104**

TITLE **CEOS** ☐ Delete
NAME **DAVIS, ARTHUR G**
STREET ADDRESS **2116 MISSION DR**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE **VP** ☐ Change ☒ Addition
NAME **Beth Kosmerl**
STREET ADDRESS **2361 Kings Lake Blvd.**
CITY-ST-ZIP **Naples, FL 34112**

TITLE **TVD** ☐ Delete
NAME **DAVIS, ARTHUR G**
STREET ADDRESS **2116 MISSION DR**
CITY-ST-ZIP **NAPLES FL 34109**

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

TITLE **DS** ☒ Delete
NAME **DAVIS, DANIELE**
STREET ADDRESS **2116 MISSION DR**
CITY-ST-ZIP **NAPLES FL 34109**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

Arthur G. Davis

January 8, 2001 (941) 530-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)