

## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000008915

1. Entity Name

FORT MYERS ASSOCIATES, INC.

Principal Place of Business

16321 STIRLING ROAD  
FT LAUDERDALE FL 33331

Mailing Address

16321 STIRLING ROAD  
FT LAUDERDALE FL 33331RAMADA LTD  
4760 S. Cleveland Ave. Ft. Myers  
FL 33907

2. Principal Place of Business

4760 S. Cleveland Ave

3. Mailing Address

4760 S. Cleveland Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

Ft. Myers, FL

City &amp; State

Ft. Myers, FL

Zip

33907

Country

USA

Zip

33907

Country

USA

6. Name and Address of Current Registered Agent

JEVREMOVIE, ALBERT  
16321 STIRLING ROAD  
FT LAUDERDALE FL 33331

7. Name and Address of New Registered Agent

Name Jennifer A. Wood

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

4760 S. Cleveland Ave

City Ft. Myers

FL

Zip Code

33907

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 Word, Jennifer A. Wood (VP) 8-17-00  
Jevremovic, Albert 8-17-00

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 \$550.00  
After SEPTEMBER 13, 2000 Min. will be \$750.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME JEVREMOVIE, ALBERT  
STREET ADDRESS 16321 STIRLING ROAD  
CITY-ST-ZIP FT LAUDERDALE FL 33331 ☐ DeleteTITLE PD  
NAME JEVREMOVIC, ALBERT  
STREET ADDRESS 4760 S. Cleveland Ave  
CITY-ST-ZIP FT. MYERS, FL 33907 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Vice President  
NAME Jennifer A. Wood  
STREET ADDRESS 4760 S. Cleveland Ave  
CITY-ST-ZIP Ft. Myers, FL 33907 ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
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: Jennifer A. Wood REGISTERED AGENT 8-17-00 813-8776181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

00 OCT -5 AM 11:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D0082093



DO NOT WRITE IN THIS SPACE

CP2E004 (5/00)

DALE MABRY ASSOCIATES, L.L.C.  
MAINGATH ASSOCIATES, INC.  
FT. MYERS ASSOCIATES, INC.

2522 NORTH DALE MABRY  
TAMPA, FLORIDA 33607  
PHONE: (813) 877-6181  
FACSIMILE: (813) 875-6171  
CELLULAR (813) 240-8415

Attachment Doc #1  
P9800000895  
00082093  
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MEMORANDUM

TO: Division of Corporations

FROM: Jennifer A. Ward  
Vice President

COMPANY: Fl. Department of State

DATE: 8/17/00

☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

To Whom It May Concern:

I am writing this letter at the request of the owner, Albert Jevremovic. The forms for the Uniform Business Agreement had been sent to his attention and unfortunately he has not been actively working in the last year due to medical reasons. For this reason the forms were not opened and processed. In the summer of last year Mr. Albert Jevremovic had both of his legs amputated due to his diabetes condition. He has been in heavy rehabilitation since then and I have been overseeing all operations of the hotels.

I have spoken with someone at the Fl. Department of State and they requested that I send this letter of request to have the late fees waived due to the seriousness of this matter. I had them send me the forms as I was unaware they needed to be sent in. We do apologize for our tardiness and do hope that you will take the above situation into consideration. I have included the regular fee for each form as was requested of me by the gentleman at the Division of Corporations.

Thank you for your time and have a wonderful day.

*Jennifer A. Ward*  
Jennifer A. Ward

Vice President

RULE # 1

IF WE DON'T TAKE CARE OF THE CUSTOMER...  
SOMEBODY ELSE WILL.