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Tracking Number: 70071490000365145970

Product & Tracking Information

Available Actions

Postal Product:

Features:

Certified Mail™

Text Updates

Email Updates

DATE & TIME

STATUS OF ITEM

LOCATION

August 29, 2014 , 4:41 pm

Notice Left (No Authorized Recipient Available)

MARCO ISLAND, FL 34145

We attempted to deliver your item at 4:41 pm on August 29, 2014 in MARCO ISLAND, FL 34145 and a notice was left because an authorized recipient was not available.

August 29, 2014 , 9:41 am

Out for Delivery

MARCO ISLAND, FL 34145

August 29, 2014 , 9:31 am

Sorting Complete

MARCO ISLAND, FL 34145

August 29, 2014 , 7:39 am

Arrived at Unit

MARCO ISLAND, FL 34145

August 29, 2014 , 1:02 am

Departed USPS Facility

FORT MYERS, FL 33913

August 28, 2014 , 8:14 pm

Arrived at USPS Facility

FORT MYERS, FL 33913

Track Another Package

Tracking (or receipt) number

LEGAL

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Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 5970



August 25, 2014

Statelong Investments, LLC
657 Dorando Ct.
Marco Island, FL 34145-1911

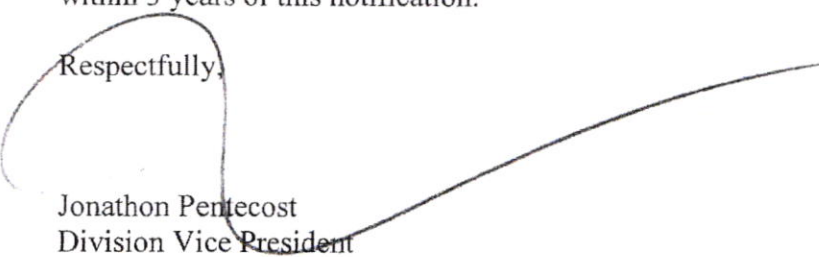
RE : Parcel ID 00149120003

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

By the terms of the PUD and as noticed herein, all agreements and negotiations for access via the points of interconnection provided for and shown on the RPUD Master Plan must be reached within 3 years of this notification.

Respectfully,



Jonathon Pentecost
Division Vice President
DR Horton, Inc.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Daniel Marnsik
62 3rd Street
Bonita Springs, FL 34134

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 6090

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service™

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Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Sent To

Daniel Marnsik

Street, Apt. No.,
or PO Box No.

62 3rd Street

City, State, ZIP+4

Bonita Springs, FL 34134

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 6090

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USPS Tracking™

[Customer Service ›](#)
Have questions? We're here to help.

Tracking Number: 70071490000365146090

Product & Tracking Information

Postal Product:

Features:
Certified Mail™**DATE & TIME****STATUS OF ITEM****LOCATION**September 2, 2014, 12:59
pm

Delivered

BONITA
SPRINGS, FL 34134

Your item was delivered at 12:59 pm on September 2, 2014 in BONITA SPRINGS, FL 34134.

August 29, 2014, 1:08 pm

Notice Left (No Authorized
Recipient Available)BONITA
SPRINGS, FL 34134

August 29, 2014, 2:47 am

Departed USPS Facility

FORT MYERS, FL 33913

August 28, 2014, 8:14 pm

Arrived at USPS Facility

FORT MYERS, FL 33913

Available Actions

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Track Another Package

What's your tracking (or receipt) number?

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August 25, 2014

Daniel Marusik
62 3rd Street
Bonita Springs, FL 34134-7321

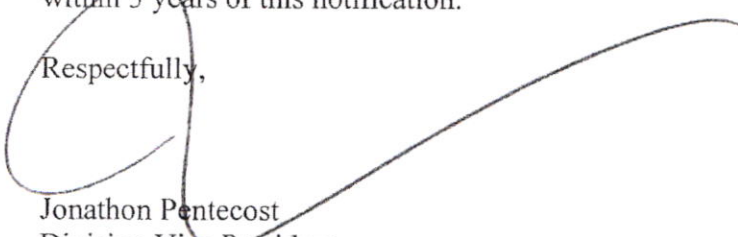
RE : Parcel ID 00149600002

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,



Jonathon Pentecost
Division Vice President
DR Horton, Inc.

10541 Ben C. Pratt / Six Mile Cypress, Suite 100 · Fort Myers, FL 33966
(239) 225-2600 · Fax (239) 225-2601
www.drhorton.com

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Center Point Community Church
6590 Golden Gate Pkwy
Naples, FL 34105

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 6069

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☒ Addressee

B. Received by (Printed Name)

NICK KLEIN

C. Date of Delivery

8-29-14

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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OFFICIAL USE

Postage

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent to

Center Point Community Church

Street, Apt. No.,
or PO Box No.

6590 Golden Gate Pkwy

City, State, ZIP+4

Naples, FL 34105

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 6069



August 25, 2014

Center Point Community Church of Naples, Inc.
6590 Golden Gate Pkwy.
Naples, FL 34105-7342

RE : Parcel ID 00151040003, 00151080005, 00150880002, 00151000001,
00150840000, 00149400008

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,

Jonathon Pentecost
Division Vice President
DR Horton, Inc.

10541 Ben C. Pratt / Six Mile Cypress, Suite 100 · Fort Myers, FL 33966
(239) 225-2600 · Fax (239) 225-2601
www.drhorton.com

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Matoga Partners, LLC 6001 Pelican Bay Blvd, #602 Naples, FL 34108</p>		<p>B. Received by (Printed Name) [Signature]</p>	<p>C. Date of Delivery 8-28-14</p>
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7007 1490 0003 6514 6083</p>	

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To	Matoga Partners, LLC
Street, Apt. No., or PO Box No.	6001 Pelican Bay Blvd #602
City, State, ZIP+4	Naples, FL 34108

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 6083



August 25, 2014

Matoga Partners, LLC
6001 Pelican Bay Blvd., Apt 602
Naples, FL 34108-7116

RE : Parcel ID 00149040002

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,

Jonathon Pentecost
Division Vice President
DR Horton, Inc.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mohammed Rahman
13056 Valenwood Dr.
Naples, FL 34119

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 5963

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X C H USPS

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9-29-14

- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Mohammed Rahman
13056 Valenwood Dr.
Naples FL 34119

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 5963



August 25, 2014

Mohammed Rahman
Fahmida Rahman
13056 Valewood Dr.
Naples, FL 34119-8577

RE : Parcel ID 00148360000

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,

Jonathon Pentecost
Division Vice President
DR Horton, Inc.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Haleakala Capital Partners
1415 Panther Ln, #244
Naples, FL 34109

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 6106

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐ Yes

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OFFICIAL USE

Postage

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Haleakala Capital Partners
1415 Panther Ln, #244
Naples, FL 34109

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 6106



Dratt Six Mile Cypress Pkwy
Suite 100
Naples, Florida 33966

CERTIFIED MAIL™



7007 1490 0003 6514 6106



Haleakala Capital Partners Ltd
1415 Panther Lane #244
Naples, FL 34109-7874

NIXIE 339 FE 1009 0008/30/14

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC 33966646141 *2674-05444-28-40

33966@6461
34109\$7874 R082



August 25, 2014

Haleakala Capital Partners Ltd
1415 Panther Lane, #244
Naples, FL 34109-7874

RE : Parcel ID 00150720007

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,

Jonathon Pentecost
Division Vice President
DR Horton, Inc.

10541 Ben C. Pratt / Six Mile Cypress, Suite 100 · Fort Myers, FL 33966
(239) 225-2600 · Fax (239) 225-2601
www.drhorton.com

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jennifer Phillips
9 Compass Court
Long Beach, CA 90803

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 6076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Lyons B. Scott* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

LYONS B. SCOTT

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
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Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Jennifer Phillips
9 Compass Court
Long Beach, CA 90803

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 6076



August 25, 2014

Jennifer Phillips
Lynn Ann Scott
9 Compass Court
Long Beach, CA 90803-4302

RE : Parcel ID 00148240007

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,

Jonathon Pentecost
Division Vice President
DR Horton, Inc.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Govig Trust
8475 E San Marino Dr.
Scottsdale, AZ 85258

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 6113

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Janette Govig*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Janette Govig

C. Date of Delivery

9-19-14

D. Is delivery address different from item 1?

☒ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Sent To

Govig Trust

Street, Apt. No.,
or PO Box No.

8475 E San Marino Dr.

City, State, ZIP+4

Scottsdale, AZ 85258

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0003 6514 6113



August 25, 2014

Govig TR, Richard A
Jeannette H Govig TR
8475 E San Marino Dr.
Scottsdale, AZ 85258-2446

RE : Parcel ID 00150240008

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,

Jonathon Pentecost
Division Vice President
DR Horton, Inc.

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Amalia Harazian
8348 Salem Ln
Dearborn Heights, MI 48127

2. Article Number

(Transfer from service label)

7007 1490 0003 6514 5956

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Amalia Harazian

8348 Salem Ln

Dearborn Heights, MI 48127

PS Form 3800, August 2005

See Reverse for Instructions

9565 4159 0000 0617 7007

D·R·HORTON® DHI
Listed
NYSE
America's Builder

August 25, 2014

Amalia Harazian
Nargeze Sarkissian
Margaret Martyniuk
8348 Salem Ln.
Dearborn Heights, MI 48127-1313

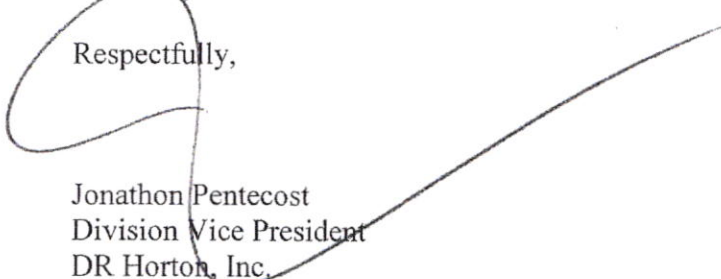
RE : Parcel ID 00148440001

Dear Property Owner:

Pursuant to the requirements contained within the Brandon Residential Planned Unit Development Ordinance Number 14-15 ("PUD"); Exhibit F; Transportation, Section B, please accept this Letter as formal notification that all Permits have been issued. As the Developer, we have received all Permits and approval from the Collier County Board of County Commissioner on before May 13, 2014.

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Respectfully,


Jonathon Pentecost
Division Vice President
DR Horton, Inc.

10541 Ben C. Pratt / Six Mile Cypress, Suite 100 · Fort Myers, FL 33966
(239) 225-2600 · Fax (239) 225-2601
www.drhorton.com