2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # 741270 May 08, 2000 8:00 am Secretary of State 1. Entity Name INDIES WEST ASSOCIATION, INCORPORATED 04-04-2000 90095 008 ****70 00 Principal Place of Business Mailing Address 2200 GULF SHORE BLVD. NORTH 2200 GULF SHORE BLVD, NORTH NAPLES FL 34102-4637 Naples FL 33940 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1789567 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) -5801 PELICAN BAY BOULEVARD Youngiana Professional Par SUITE-405 26 40 Golden Hate Parkway RICHMAN, KENNETH W., JR. Zip Code NAPLES FL 33963-2740 -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 DATE Storiature, typed or orinted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Vice President Change Addition TITLE Delete TITLE Larry Eaton RIDDLE, H. MARVIN NAME NAME 1 CR2E037 STREET ADDRESS 2215 Gulfshore Blvd., N 2258 GULFSHORE BLVD - N. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34102 Naples.FL 34102 Change ▼ Addition Delete TITLE. Secretary TITLE NAME L BISSETT, ANDREW NAME Edward F.Blake STREET ADDRESS STREET ADDRESS 2228 GULFSHORE BLVD., NORTH 2220 Gulfshore Blvd., N CITY-ST-ZIP CITY-ST-ZIP NAPLES FL Naples, Florida 34102 ☐ Change Delete TITLE - 🔲 Addition TITLE NAME CHAPMAN, ED NAME STREET ADDRESS STREET ADDRESS 2218 GULFSHORE BLVD. NORTH CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 33940 ☐ Change ☐ Addition TITLE TITLE Delete TOWLE, ELISABETH NAME NAME STREET ADDRESS STREET ADDRESS 2242 GULFSHORE BLVD - N. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34102 Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

TITLE

HAME

STREET ADDRESS

CITY-ST-ZIF

changed, or on an attachm

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: DONALD BENDETTA REMINERO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Change

Addition