2000 UNIFORM BUSINESS REPORT (UBR)

May 13, 2000 8:00 am Secretary of State **DOCUMENT # 744650** 1. Entity Name GOLF CREST OF NAPLES CONDOMINIUM ASSOCIATION, INC. 05-13-2000 90045 046 ****61.25 Principal Place of Business Mailing Address 1044 CASTELLO DR 1044 CASTELLO DR SUITE 206 SUITE 206 953605 NAPLES, FL 34103 NAPLES, FL 34103 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1923809 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SOUTHWEST PROPERTY MANAGEMENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 1044 CASTELLO DRIVE, SUITE 206 NAPLES, FLORIDA 34103 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. VPD/TD X Delete Addition 🔼 Change TITLE MORRIS, SUSAN NAME BLAIS, ARMAND NAME 2832 44TH TERRACE SW P.O. BOX 1364 STREET ADDRESS STREET ADDRESS NAPLES, FL 34116 CITY-ST-ZIP CITY-ST-ZIP SEBASTAIN, FL PD TITLE Delete TITLE X Change Addition ABERNATHY, JOYCE ABERNATHY, JOYCE NAME 4050 GOLDEN GATE PKWY 2736 DAVIS BLVD. STREET ADDRESS STREET ADDRESS NAPLES,-FL -34116 NAPLES, FL CITY-ST-ZIP CITY-ST-ZIP TITLE X Delete TITLE SD X Change Addition SD NAME MORRIS, SUSAN GIESEY, STAN STREET ADDRESS 2832 44TH TERRACE SW STREET ADDRESS 1044 CASTELLO DR #206 NAPLES, FL 34116 CITY-ST-ZIP NAPLES, FL 34103 CITY-ST-ZIP X Delete TITLE Change ☐ Addition DOSCH, IGGIE L. 3601 11TH AVENUE SW NAME NAME STREET ADDRESS STREET ADDRESS NAPLES, FL 34117 CITY-ST-ZIP CITY-ST-ZIP **VPD** ☐ Addition ☐ Change ☐ Delete TITLE TITLE HUSK, CLIFF NAME NAME 2832 44TH TERRACE SW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 34116 Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE: DIKELIOR

changed, or on an attachment with an address, with all other like empowered.

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