

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90040 013 ****61.25

0054001

DOCUMENT # 751005

1. Entity Name

**VANDERBILT SURF COLONY, A CONDOMINIUM, SECTION I
I, ASSOCIATION, INC.**



Principal Place of Business

**15 BLUEBILL AVE
NAPLES FL 34108**

Mailing Address

**15 BLUEBILL AVE
NAPLES FL 34108**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2099444**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**SWALM & MURRELL, P.A.
2375 TAMiami TR N
SUITE 308
NAPLES FL 33940**

7. Name and Address of New Registered Agent

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **RITCHIE, RICHARD E**
STREET ADDRESS **15 BLUEBILL AVE**
CITY-ST-ZIP **NAPLES FL**

TITLE **SD** ☐ Delete
NAME **HARRISON, LEE**
STREET ADDRESS **15 BLUEBILL AVENUE**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **VD** ☐ Delete
NAME **ZUBER, CHRIS**
STREET ADDRESS **15 BLUEBILL AVE**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE ~~SD~~ ☐ Delete
NAME ~~DAVID ROBERT~~
STREET ADDRESS ~~15 BLUEBILL AVE~~
CITY-ST-ZIP ~~NAPLES FL~~

TITLE **TD** ☐ Delete
NAME **MARIN, JOANNE**
STREET ADDRESS **15 BLUEBILL AVE**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **D** ☐ Delete
NAME **SHYKEN, CHARLENE**
STREET ADDRESS **15 BLUEBILL AVE**
CITY-ST-ZIP **NAPLES FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **Parejko, James**
STREET ADDRESS **15 Bluebill Ave**
CITY-ST-ZIP **Naples, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Kudzma, Jack**
STREET ADDRESS **15 Bluebill Ave**
CITY-ST-ZIP **Naples, FL**

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard E. Ritchie **RICHARD E. RITCHIE** 7/26/03

CR2E037 (10/02)