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

DOCUMENT # 752559



Apr 21, 2003 8:00 am Secretary of State 04-21-2003 90439 047 ****61.25

FILED

BOCA CIEGA VILLAGE CONDOMINIUM I ASSOCIATION, IN C.					
Mailing Address ,					
187 FOREST LAKES BLVO. NAPLES FL 34105 US					
3. Mailing Address					
	Mailing Address . 187 FOREST LAKES BLVD. NAPLES FL 34105 US				

	ce of Business	Mailing Address ,						
187 FOREST LAKES BLVD. Naples Fl 34105 Us		187 FOREST LAKES BLVD. NAPLES FL 34105 US						
					L CHERN BONG BONG HING BURGE BURGE		1 1 1 1 1 1 1 1	
Principal Place of Business 3. Mailing Address		· 	Land of the state					
Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 59-	4. FEI Number 59-2163077		plied For at Applicable	
Zip	Country	Zip	Country	5. Certificate of State		8.75 Add	litional	
	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Addre	ess of New Registered Ag			
			Name					
GRACEY.	, robert t		Stroot Adde	Street Address (P.O. Box Number is Not Acceptable)				
	EST LAKES BLVD		Street Addi	ess (F.O. Box Number is No	ot Acceptable)			
NAPLES	FL 34105							
	\$ *		City			Zip Cod		
					FL	Lip coo		
	named entity submits this statement for	r the purpose of changing its	registered office or reg	gistered agent, or both, in th	e State of Florida. I am fai	miliar with,	and accept	
the obligat	tions of registered agent.							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE	E: Registered Agent signature re	enuired when reinstating)	DATE			
							10	
I	FILE NOW: FEE IS \$61.25	9. Election Can Trust Fund C	npaign Financing contribution.	\$5.00 May Be Added to Fees	Make Check Florida Departn	-		
10	OFFICERS AND DII	PECTORS	1	ADDITIONS (CLIANCES	S TO OFFICERS AND DIRE	CTOBC IN	10	
10.	DP OFFICERS AND DI		11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRE			
TITLE NAME	BURKETT, JANET	☐ Delete	TITLE NAME		ì	Change	Addition	
STREET ADDRESS	1022 PINE ISLE LN		STREET ADDRESS				1:	
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP				};	
	VPD					☐ Change	Addition	
TITLE NAME	COLBY, MARGARET	Delete	TITLE NAME	SA RAYMONIC)	Change	Audition	
STREET ADDRESS	1015 PINE IS LANE		STREET ADDRESS / 4	05A, RAYMONG 013 PINE 15L	E LANK		1	
CITY-ST-ZIP	NAPLES FL 34112			APLES FL 3			{	
TITLE .	DS	Delete		TIPKES, PE S		Change	Addition	
NAME	HOCKERSMITH, FRED	Delete.	NAME 4	ARDING ERA	me to be a f		- Assumon	
STREET ADDRESS	1045 PINE ISLE LN		STREET ADDRESS	ARDING, FRA	N19 2/N			
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP	SAPLES, EL 34	= 27702			
TITLE	TD	☐ Delete	TITLE	MED, EL SI		Change	Addition	
NAME	GOOD, ROBIN	□ Detete	NAME		ı	Ondrige	Addition	
STREET ADDRESS	1083 PINE ISLE LN		STREET ADDRESS					
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP					
TITLE	ASTD	☐ Delete	TITLE A	5T		Change	Addition	
NAME	GRACEY, ROBERT	□ Delete	NAME	<i>J</i>	4	-1 Aumilia	Last Figurity	
STREET ADDRESS	187 FOREST LAKES BLVD.		STREET ADDRESS				{	
CITY-ST-ZIP	NAPLES FL 34112		CITY-ST-ZIP					
TITLE	1.4	□ Delete	TITLE 0			Change	Addition	
NAME		□ Delete	NAME H	EDLUND SYL	VALINI	0.00196	ACT Addition	
STREET ADDRESS		tt ::	STREET ADDRESS /	EDLUMO, SYL 042 PINE ! IMPLES EL 3	SLE LANE		}	
CITY-ST-ZIP			CITY-ST-ZIP	100,000	4112			

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:

PROBERTT GARCEY 4/11/03

239-649-5667