2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # 759770** Mar 03, 2000 08:00 AM 1. Entity Name **Secretary of State** CARLOS POINTE BEACH CLUB ASSOCIATION, INC. Principal Place of Business Mailing Address C/O D.G. SUITOR & ASSOC. PO BOX 6017 1661 ESTERO BLVD. #27 FT. MYERS BEACH FT. MYERS BEACH FL FL 33917 33932 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 59-2127344 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name D.G. SUITOR & ASSOC INC. 1661 ESTERO BLVD STE 27A Street Address (P.O. Box Number is Not Acceptable) FORT MYERS BEACH FLZip 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 DOUGLAS G. SUITOR 03/03/2000 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE ☐ Addition NAME DICK CONWAY NAME STREET ADDRESS STPEET ADDRESS 1975 BURNHAM LN CITY-ST-ZIP CITY-ST-ZIP KETTERING ОН TITLE X Delete ☐ Change ☐ Addition NAME RONALD POWELL NAME STREET ADDRESS RR #1 STREET ADDRESS CITY-ST-ZIP CONVERSE IN CITY-ST-ZIP TITLE ☐ Delete TITLE DV X Change Addition NAME NAME ABEND TOBY ABEND TOBY STREET ADDRESS 144 UPLAND AVE 144 UPLAND AVE STREET ADDRESS CITY-ST-ZIP NEWTON HIGHLAND CITY-ST-7iP MA 02161 NEWTON HIGHLAND MA 02161 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CASTLEMAN ED STREET ADDRESS 322 BX 254 STREET ADDRESS CITY-ST-ZIF MARIETTA NY 13110 CITY-ST-ZIP TITLE X Dalete PD TITLE Change ☐ Addition NAME PICKO KATHRYN NAR/F STREET ADDRESS 5430 SW 39TH WAY STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE CITY-ST-ZIP FL 33312

STREET ADDRESS

CITY-ST-ZIP

TITLE

Change |

☐ Addition

X Delete

FL 33931

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

WILLIAMSON

FT. MYERS BCH.

8350 ESTERO BLVD PH2

DOUGLAS

^{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.

JOSEPH PECKO, TD 5430 SW 39TH WAY

FT. LAUDERDALE, FL 33312

JERRY RICKETTS, D 23294 DEANHURST

CLINTON TWP., MI 48035

IRMA CHIARCOS, PD 4535 CONSESSION 8 RR3 MAIDSTONE ONTARIO ONTARIO CANADA NOR1KO

KATHLEEN COWAN, SD 9220 OVERLOOK TRAIL

EDEN PRAIRIE, MN 55347