

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N14032

1. Entity Name

600 LA PENINSULA CONDOMINIUM ASSOCIATION, INC.

FILED

May 28, 2002 8:00 am  
Secretary of State

05-28-2002 91722 011 \*\*\*\*61.25

Principal Place of Business

Mailing Address

600 LA PENINSULA BLVD  
NAPLES FL 34113

834 BALD EAGLE DRIVE  
C/O RESORT MANAGEMENT  
MARCO ISLAND FL 34145

2. Principal Place of Business

3. Mailing Address

12636 Tamiami Trail East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
Naples, FL

4. FEI Number

65-0067270

Applied For

Not Applicable

Zip

Country

Zip  
34113

Country  
Collier

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YACINO, RICK  
834 BALD EAGLE DRIVE  
MARCO ISLAND FL 34145

Name

Collier Association Management

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

12636 Tamiami Trail East

City

Naples

FL

Zip Code  
34113

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 true 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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME PIERPAOLI, MIKE  
STREET ADDRESS 632 LA PENINSULA LN  
CITY-ST-ZIP NAPLES FL 34113 ☐ Delete

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

TITLE STD  
NAME ANDERSON, RUSSELL  
STREET ADDRESS 641 LA PENINSULA BLVD  
CITY-ST-ZIP NAPLES FL 34113 ☐ Delete

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

TITLE VD  
NAME SATMARY, ATILLA  
STREET ADDRESS 52 BALD EAGLE  
CITY-ST-ZIP HACKETTSTOWN NJ 07840 ☒ Delete

TITLE STD  
NAME Gerry Durrenberger  
STREET ADDRESS 603 La Peninsula Blvd.  
CITY-ST-ZIP Naples, FL 34113 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)