

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N30304

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: EMERALD GREENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

R & P MGMT INC
265 S AIRPORT RD
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

R & P MGMT INC
265 S AIRPORT RD
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0092107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & P MANAGEMENT ASSOCIATES
265 AIRPORT RD SO
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIELE, SAM
Address: 732 WOODSHIRE LN, I-10
City-St-Zip: NAPLES, FL 34105

Title: VD () Delete
Name: LECCE, LOU
Address: 368 WOODSHIRE LN. #B3
City-St-Zip: NAPLES, FL 34105

Title: TSD () Delete
Name: EVVA, PHYLLIS
Address: 420 WOODSHIRE LN, #C-7
City-St-Zip: NAPLES, FL 34105

Title: SD () Delete
Name: GROGAN, TOM
Address: 836 WOODSHIRE LN. #K10
City-St-Zip: NAPLES, FL 34105

Title: TD () Delete
Name: CARROLL, ERNEST
Address: 368 WOODSHIRE LN. #B11
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: FOGG, GEORGE
Address: 628 WOODSHIRE LANE #61
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LECCE, LOU
Address: 368 WOODSHIRE LN. #B3
City-St-Zip: NAPLES, FL 34105

Title: VPD (X) Change () Addition
Name: RUDNICKI, EUGENE
Address: 567 WOODSHIRE LN #F-1
City-St-Zip: NAPLES, FL 34105

Title: SD (X) Change () Addition
Name: DOUCETTE, JUDY
Address: 732 WOODSHIRE LN #I-6
City-St-Zip: NAPLES, FL 34105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WARD, MICHAEL
Address: 940 WOODSHIRE LN #M-10
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAM MIELE

_____ Electronic Signature of Signing Officer or Director

PD

04/23/2002

_____ Date