

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90020 026 ****61.25

DOCUMENT # N46446

1. Entity Name

GOODLETTE PROFESSIONAL CENTER CONDOMINIUM ASSOCI

Principal Place of Business

Mailing Address

680 GOODLETTE RD., NORTH
 NAPLES FL 33940-5642

680 GOODLETTE RD., NORTH
 NAPLES FL 34102-5613

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0302730

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KNOTTS, JUDITH A. B
 GOODLETTE PROFESSIONAL CENTER
 680 GOODLETTE RD. NO.
 NAPLES FL 34102

Name

Veora Little

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

680 Goodlette Road

City

Naples

FL

Zip Code

34102

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

Veora Little

1/28/00

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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME DS
 STREET ADDRESS PFAFF, BEVERLY
 CITY-ST-ZIP 680 GOODLETTE RD. NO.
 NAPLES FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME DP
 STREET ADDRESS DERNBACH, PAUL
 CITY-ST-ZIP 680 GOODLETTE RD N
 NAPLES FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME D
 STREET ADDRESS LITTLE, VEORA
 CITY-ST-ZIP 680 GOODLETTE RD N
 NAPLES FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME D
 STREET ADDRESS DERNBACH, MARY JO
 CITY-ST-ZIP 680 GOODLETTE RD
 NAPLES FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 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 empowerers.

SIGNATURE:

Signature Required
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-00

Date

262-1721

Daytime Phone #

CR2E037 (9/99)