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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N93000001168 (4)

THE MARQUESA AT BAY COLONY CONDOMINIUM ASSOCIATI

ON. INC. Principal Place of Business Mailing Address 8990 BAY COLONY DR. 8990 BAY COLONY OR. 3. Date Incorporated or Qualified NAPLES FL 33963 NAPLES FL 33963 03/17/1993 4. FEI Number Applied For 74-2844327 Not Applicable 2. Principal Place of Business 2a, Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #. etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution 27 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent nt rolluroff P.A. 40 Joseph E. Adas SWALING MURRELL, P.A. Box Number is Not Acceptable) 82 2375 TAMIAMI TRAIL N., SUITE 308 NAPLES FL 33940 83 2/0 84 City 3410.3 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familia, with, and accept the objection 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ent and tille if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE BLESSING, NORBERT J. 1.2 NAME NAME 8990 BAY COLONY DR., #1401 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETÉ Change Addition TITLE 2.1 TITLE VALLACE, ANTHONY NAME 2.2 NAME 8990 BAY COLONY DR., #801 2.3 STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DELETÉ Change Addition TITLE 31 TITLE NAME MCCARTHY, SHARON 3.2 NAME STREET ADDRESS 8990 BAY COLONY DR., #1002 3.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE STARK, KENNETH NAME 4 2 NAME 8990 BAY COLONY DR., #703 STREET ADDRESS 4.3 STREET ADDRESS **N**aples fl CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE Change TITLE HARDY JOHN A 8990 BAY COLONY DR. #401 NAME HARDY, JOHN A 5.2 NAME 8990 BAY COLONY DR., #401 STREET ADDRESS 5.3 STREET ADDRESS NAPLES FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE CULLO-AN, 8990 BAY (NAME 6.2 NAME LAWRENCE COLONO4 DR # 903 6.3 STREET ADDRESS STREET ADDRESS

JA PLGS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

FILLIAM MANULALIA

FILED

Feb 26 1998 8:00am

Secretary of State