## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # N93000001168 Apr 04, 2000 8:00 am 1. Entity Name Secretary of State THE MARQUESA AT BAY COLONY CONDOMINIUM ASSOCIATI 04-04-2000 90004 013 \*\*\*\*61.25 Principal Place of Business Mailing Address 8990 BAY COLONY DR. 8990 BAY COLONY DR. NAPLES FL 34108 NAPLES FL 34108-6702 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 74-2844327 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BECKER & POLIAKOFF P.A. 46 JOS E. ADAMS Street Address (P.O. Box Number is Not Acceptable) BECKAR & POLCUKOFF P. A. C/O JPH E ADAMS 3003 TAMIAMI TR NO COLLIER P/I **SUITE 210** Zip Code NAPLES FL 34103 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 DATE 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD TITI F Change ☐ Addition Delete TITLE BLESSING, NORBERT 8990 BAY COLONY DRIVE #1401 VALLACE, ANTHONY NAME NAME 8990 BAY COLONY DR., #801 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES FL NAPLES FL 34108 TITLE Delete TITLE VPD Change ☐ Addition Jaskol, Leonard MCCARTHY, SHARON NAME NAME 8990 BAY COLONY DRIVE #402 8990 BAY COLONY DR., #1002 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 NAPLES FL TITLE Delete TITLE TD **X** Change ☐ Addition BARBER, JOHN NAME STARK, KENNETH NAME 8990 BAY COLONY DRIVE # FOZ 8990 BAY COLONY DR., #703 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL NAPLES, FL 34108 TITLE D TITLE Change Addition Delete SD LAKE, VIVIANNE 8990 BAY COLONY DRIVE HARDY, JOHN A NAME NAME STREET ADDRESS 8990 BAY COLONY DR SUITE 401 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 NAPLES, FL 3408 ☐ Addition TITLE Change TITLE □ Delete MENDELSON, PETER NAME CULLIGAN, LAWRENCE NAME 8990 BAY COLONY DRIVE STREET ADDRESS 8990 BAY COLONY DR SUITE 903 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 NAPLES, FL 34108 ☐ Addition TITLE. ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 empowered.

3/23/00 594.9000 SIGNATURE: