FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 01, 2002 8:00 am Secretary of State DOCUMENT # N93000001168 1. Entity Name THE MARQUESA AT BAY COLONY CONDOMINIUM ASSOCIATI 04-01-2002 90653 036 ****61.25 ON, INC. Principal Place of Business Mailing Address 8990 BAY COLONY DR. 8990 BAY COLONY DR. NAPLES FL 34108 NAPLES FL 34108 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 Zip Country \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) BECKER & POLIAKOFF P.A. C/O JOS E. ADAMS 3003 TAMIAMI TR NO COLLIER P/I SUITE 210 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Change Addition CR2E037 (9/01 NORBERT, BLESSING NAME NAME STREET ADDRESS 8990 BAY COLONY DRIVE #1401 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 TITLE ☐ Delete TIT! F ☐ Change ☐ Addition BARBER, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 8990 BAY COLONY DRIVE #702 CITY: ST-ZIP -CITY-ST-ZIPT NAPLES FL 34108 Addition TITLE X Delete TITLE ☐ Change gallagher, Jo lake, vivianne NAME NAME 8990 BAY COLONY DRIVE STREET ADDRESS 8990 BAY COLONY DRIVE \$701 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 NAPLES, FL 34108 TITLE Change ☐ Addition TITLE ☐ Delete MENDELSON, PETER NAME NAME STREET ADDRESS 8990 BAY COLONY DRIVE #803 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 TITLE ☐ Delete TITI F Change ☐ Addition SCANLON, TIMOTHY 8990 BAY COLONY DRIVE #1101 SCANLON, TIMOTHY NAME NAME STREET ADDRESS 8990 BAY COLONY DRIVE #1101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 APLES FL 34108 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE

NOTURE AND TYPED OR PRINTED NAME OF SUSTRING OFFICER OR DIRECTOR

3/14/02

<u> 129-594-9000</u>

Daytime Phone #