

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 08:00 AM
Secretary of State

DOCUMENT # N93000001270

1. Entity Name
 FIELDSTONE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 265 AIRPORT ROAD S NAPLES FL 34104	Mailing Address 265 AIRPORT ROAD S NAPLES FL 34104
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0394780	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GLENN CARROLL, R&P PROPERTY MGT.
 265 AIRPORT ROAD SOUTH

 NAPLES FL 34104 US

7. Name and Address of New Registered Agent

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

 City **FL** Zip Code

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 GLENN CARROLL DATE 04/30/2001
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

TITLE	P	<input type="checkbox"/> Delete
NAME	CALLERT, BARBARA	
STREET ADDRESS	3735 FIELDSTONE BLVD #904	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	<input type="checkbox"/> Delete
NAME	LATANZZI BRENDA	
STREET ADDRESS	3720 FIELDSTONE BLVD. #705	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LOGAN RHONDA	
STREET ADDRESS	3780 FIELDSTONE BLVD. #3-101	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	VP	<input type="checkbox"/> Delete
NAME	KILLIAN GUNTER	
STREET ADDRESS	3710 FIELDSON BLVD., #504	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	DTS	<input type="checkbox"/> Delete
NAME	PORTER KAYO	
STREET ADDRESS	3720 FIELDSTONE BLVD #702	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUCKLY DENNE	
STREET ADDRESS	3705 FIELDSTONE BLVD	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LATANZZI BRENDA	
STREET ADDRESS	3720 FIELDSTONE BLVD. #705	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOGAN RHONDA	
STREET ADDRESS	3780 FIELDSTONE BLVD. #3-101	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOGLE MARK	
STREET ADDRESS	3780 FIELDSTONE BLVD	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	ID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NULTY LARRY	
STREET ADDRESS	3705 FIELDSTONE BLVD	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: RHONDA LOGAN PD 04/30/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2E037 (11/00)