2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Feb 28, 2001 8:00 am DOCUMENT # N9600001376 Secretary of State 1. Entity Name BAREFOOT BOAT CLUB CONDOMINIUM ASSOCIATION, INC. 02-28-2001 90006 007 ****61.25 Mailing Address Principal Place of Business 5025 BONITA BEACH ROAD 745 12TH AVE S **BONITA SPRINGS FL 33923** STE J NAPLES FL 34102 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 65-0673914 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 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) **KRAUS & WYNE PA** 1072 GOODLETTE RD NORTH NAPLES FL 34102 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change TITLE ST Delete TITI F ☐ Addition RUFF, EDWARD J NAME NAME 4760 TAMIAMI TRAIL NORTH, SUITE 6 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 33940 Change ☐ Addition TITI F ☐ Detete TITLE VERVILLE, ROBERT NAME NAME STREET ADDRESS 1 BLUE HERON WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ACTON MA 01720 Change ☐ Addition TITLE ☐ Delete TITLE NAME EDELBROCK, K NAME 6345 CONSTITUTION DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT WAYNE IN 46804 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MANFREDI, RICHARD NAME NAME STREET ADDRESS **PO BOX 347** STREET ADDRESS CITY-ST-ZIP **NEWBURY OH 44065** CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE KOPETSKY, GEORGE NAME NAME STREET ADDRESS 11058 MANN RD STREET ADDRESS CITY-ST-ZIP MOORESVILLE IN 46158 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition KNIFF, STUART NAME NAME 3377 ENGLISH HILLS DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GRAND RAPIDS MI 49504** 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 appowered.

 $\frac{2-10-01}{Date}$