## 2003 NOT-FOR-PROFIT COPPORATION UNIFORM BUSINESS REPORT (UBR)

## May 14, 2003 8:00 am Secretary of State

			<u> </u>					
1. Entity Nan	MENT # <b>N97000</b> ( iton lakes two condomi		04-25-2003 90272	? 022 ****(	51.25			
			55640378					
Principal Place of Business 6702 LONE OAK BLVD NAPLES FL 34109		Mailing Address 6702 LONE OAK BLYD NAPLES FL 34109			99040010		U	
				1 15 15 16 17 17 17	ANT STEIN DOWN EINEN DOWN DERNY OF		\$H(\$1H(\$1H)	
2. Principal Place of Business		3. Mailing Address						
Suile, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 6	5-0746144	No	plied For Applicable	
Zip	Country	di≥	Country	5. Certificate of St	5. Certificate of Status Desired See Required Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
EALL AT	لى بىلىنىڭ ئى يىلىدىنىڭ ئالىكىنىڭ ئالىكى ئىلىنىڭ ئالىكى ئالىكى ئىلىنىڭ ئالىكى ئالىكى ئىلىنىڭ ئالىكى ئالىكى ئىل Tenena i i i i i i i i i i i i i i i i i i i		Name	Name				
FALK, STEVEN M 850 PARK SHORE DR 3RD FLOOR NAPLES FL 34103			Street A	Street Address (P.O. Box Number is Not Acceptable)				
NAPLES	FL 34103		<u> </u>	·				
			City	FL Zip Code			1	
SIGNATURE	tions of registered agent.	<del></del>		ure required when reinstating)	DATE			
FILE NOW: FEE IS \$61:25  9. Election Camp Trust Fund Cor				\$5.00 May Be Added to Fees	Make Checi Florida Depar			
10.	OFFICERS AND DIR	ECTORS	11.		ES TO OFFICERS AND DI	RECTORS IN		
NAME STREET ADDRESS CITY-ST-ZIP	TAMBURRO, MARIE 6300 HAMPTON LAKES CIR NAPLES FL 34119		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marie Tam 6300 Huntin Maples Fi				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCALISE, FRANK  2520 ASPENCREEK LANE NAPLES FL 34119  DELOTE			6310 HUMTING	12002-11			
NAME STREET ADDRESS CITY-ST-ZIP	GOFF, CHARLES 6560 HUNTINGTON LAKES CIRCLE # 202 NAPLES FL 34119		NAME STREET ADDRESS CITY-ST-ZIP	ISABRE CA 2010 Aspence Neples FL	reek lane # 34119	Change_ ∂©]	_[] Addition_	<del></del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kent Kulegue 6702 Love OAK NAPLES, FL	□ Delete  1 34/109	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	Change	☐ Addition	
TITLE NAME STREET ADDRESS   CITY-ST-ZIP		☐ Delate	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Add/tion	

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 tacturate 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:

HELDINGS IBE REQUIRED HAVE OF SIGNING OFFICER ON DESCRIPTION

4-1503 239596.1886

Davtime Phone 6