

NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # *N97000001447
 1. Entity Name
The Strand Homeowners ✓



DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business
205 Airport Rd. S.
 Suite, Apt. #, etc.

3. Mailing Address
205 Airport Rd. S.
 Suite, Apt. #, etc.

55052272

DO NOT WRITE IN THIS SPACE

City & State
Naples, FL
 ZIP
34104

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Naples, FL
 ZIP
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4. FEI Number
* 59-341317 Applied For
 Not Applicable

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

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7. Name and Address of Current Registered Agent
 Name
Glenn Carroll
 Street Address (P.O. Box Number is Not Acceptable)
205 Airport Rd. S.
 City
Naples FL ZIP Code
34104

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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE Glenn Carroll
 Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

FEES IS \$81.20
 Initial or Amended UBR

9. Election Campaign Financing
 Trust Fund Contribution \$5.00 May Be Added to Fees

Make Check Payable to:
 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President - D Michael Lyster 5931 Barclay Lane Naples, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President - D Robert Polizzotto 5871 Marble Court Naples, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary - D Richard Galash 5914 Barclay Lane Naples, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer - D Michael Marchetta 5943 Barclay Lane Naples, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director - D Alan Digangi 5804 Marble Court Naples, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.
 SIGNATURE: Yuri Brano
 Signature and typed or printed name of signing officer or director Date Daytime Phone

CR2E037B (12/02)