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Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Feb 16, 2001 8:00 am DOCUMENT # 724472 **Secretary of State** 1. Entity Name 02-16-2001 90016 033 ****61.25 THE WHITEHALL OF NAPLES, INC. Principal Place of Business Mailing Address 1255 GULF SHORE BLVD. NO. 1255 GULF SHORE BLVD. NO. NAPLES FL 34102 NAPLES FL 33940 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1510687 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired ≅Fee Required⊸~≃ 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KLING, PEGGY B 1255 GULF SHORE BLVD NAPLES, FL City Zip Code NAPLES FL 34102 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Change ☐ Addition TITLE ☐ Delete TITLE LANE, ROBERT H. NAME NAME STREET ADDRESS STREET ADDRESS 1255 GULF SHORE BLVD N CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 00000 PD ☐ Delete TITLE Change Addition TITLE SCHLEMMER, CARL NAME NAME STREET ADDRESS _1255_GULF_SHORE,BLVD.N---STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES, FL 00000 ☐ Change ☐ Addition TITLE ☐ Delete TITLE MOORE, CHARLES F. MRS. NAME NAME STREET ADDRESS 1255 GULF SHORE BLVD N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 00000 TITLE ☐ Delete TITLE ☐ Change ☐ Addition KLING. PEGGY NAME NAME STREET ADDRESS 1285 GULF SHORE BLVD. N. STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP NAPLES, FL 00000 TITLE Delete TITLE Change ☐ Addition DAVIS, BARRY D NAME NAME STREET ADDRESS 1255 GULF SHORE BLVD N STREET ADDRESS CITY-ST-ZLP CITY-ST-ZIP NAPLES FL 34102 TITLE ☐ Delete TITLE 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