

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90509 012 ****61.25

0055153

DOCUMENT # N01880

1. Entity Name

**THE WINDSTAR CONDOMINIUM SECTION ONE ASSOCIATION
, INC.**



Principal Place of Business

C/O 267 N. COLLIER BLVD.
SUITE 201
MARCO ISLAND FL 34145
US

Mailing Address

PO BOX 1283
MARCO ISLAND FL 34146
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2451042**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

FALK, STEVEN M
C/O ROETZLE & ANDRES
850 PARK SHORE DR. - 3RD FLOOR
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name
Denise Patas

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

267 N. Collier Blvd. Ste 201

City

Marco Island

FL

Zip Code

34145

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

Denise A. Patas

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/4/03

FILE NOW: FEE IS \$61.25

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 **PD** ☐ Delete
NAME **MARR, WALTER**
STREET ADDRESS **4650 YACHT HARBOR DR**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **D** ☐ Delete
NAME **SCOTT, SUE**
STREET ADDRESS **4604 YACHT HARBOR DR**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **SD** ☐ Delete
NAME **WALSH, MICHAEL**
STREET ADDRESS **4456 YACHT HARBOR DR**
CITY-ST-ZIP **NAPLES FL**

TITLE **SD** ☐ Delete
NAME **BARNICLE, TERRENCE**
STREET ADDRESS **4650 YACHT HARBOR DR**
CITY-ST-ZIP **NAPLES FL**

TITLE **TD** ☐ Delete
NAME **GLEASON, TOM**
STREET ADDRESS **4650 YACHT HARBOR DR**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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)(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 empowered.

SIGNATURE:

Denise A. Patas

4/4/03

CR2E037 (10/02)