2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005610

City-St-Zip: NAPLES, FL 34110

Entity Name: ALTESSA II AT VASARI CONDOMINIUM ASSOCIATION, INC.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:
8430 ENT	OR WOODROW ERPRISE CIRCLE #100 ON, FL 34202	C/O TAYLOR WOODROW 8430 ENTERPRISE CIRCLE, STE 100 BRADENTON, FL 342024108
Current M	ailing Address:	New Mailing Address:
C/O TAYLOR WOODROW 8430 ENTERPRISE CIRCLE #100 BRADENTON, FL 34202		C/O TAYLOR WOODROW 8430 ENTERPRISE CIRCLE,,STE 100 BRADENTON, FL 342024108
FEI Number:	FEI Number Applied For (() FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered Ager	nt: Name and Address of New Registered Agent:
8430 ENT	TH OR WOODROW COMMUNITIES ERPRISE CIRCLE #100 ON, FL 34202	BASS, KEITH E C/O TAYLOR WOODROW COMMUNITIES 8430 ENTERPRISE CIRCLE, STE 100 BRADENTON, FL 342024108
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATURE: KEITH E. BASS		05/01/2003
	Electronic Signature of Registere	d Agent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () Delete SMITH, ALAN B 2950 IMMOKALEE ROAD #2 NAPLES, FL 34110	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VD () Delete SCHWARTZ, DOUGLAS L 2950 IMMOKALEE ROAD #2 NAPLES, FL 34110	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address:	STD () Delete REED, PHYLLIS A 2950 IMMOKALEE ROAD #2	Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DOUGLAS L. SCHWARTZ V 05/01/2003