2002 UNIFORM BUSINESS REPORT (UBR)

Feb 26, 2002 8:00 am **DOCUMENT # 713365 Secretary of State** 1. Entity Name 02-26-2002 90140 002 ****61.25 GRAND PRIX APARTMENTS, INC., A CONDOMINIUM CORPO Principal Place of Business Mailing Address SKETCH DRIVE 820 KETCH DRIVE 4S FL 34103 NAPLES FL 34103 US 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 59-1812527 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) MARTIN, HELEN T 820 KETCH DR. #6 NAPLES FL 34103 City Zip Code FI 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 6, ... 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (9/01) Addition TITLE TITLE ☐ Delete HARRISON, CHARLES R. NAME CR2E037 STREET ADDRESS STREET ADDRESS 932 MARBLEHEAD DRIVE CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 ☐ Addition SVD TITLE Delete TITLE Change GIROLAMO, JOS NAME NAME STREET ADDRESS STREET ADDRESS 95 HARBOR DR CITY-ST-ZIP CITY-ST-ZIP BELLEAIR BCH FL 34786 -TITLE ☐ Delete TITLE Change ☐ Addition DERMODY, PADDY NAME NAME STREET ADDRESS 820 KETCH DR # 1 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34103 TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME MARTIN, HELEN T. NAME STREET ADDRESS 820 KETCH DRIVE #6 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 ☐ Change ☐ Addition TITLE ☐ Delete TITLE QUATRARO, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 820 KETCH DR, #5 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 TITLE ☐ Addition TITI F ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS

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 eath; 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP