


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

FILED
Mar 11, 2003 8:00 am
Secretary of State

03-11-2003 90140 044 ****61.25

DOCUMENT # 728662
1. Entity Name
THE LAURENTIANS OF NAPLES, INC.



Principal Place of Business
**1285 GULF SHORE BLVD NO.
NAPLES FL 34102**

Mailing Address
**1285 GULF SHORE BLVD NO.
NAPLES FL 34102**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1606462** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**RYAN, THOMAS F
1285 GULF SHORE BLVD N
UNIT 8A
NAPLES FL 34102**

7. Name and Address of New Registered Agent
Name **R. G. PASTRYK**
Street Address (P.O. Box Number is Not Acceptable) **1285 GULF SHORE BLVD N**
City **NAPLES** FL Zip Code **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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* *[Signature]* **3/10/03**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAWSON, CHARLES J 1285 GULF SHORE BLVD NORTH NAPLES FL 34102 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERKEY, DONALD 1285 GULF SHORE BLVD NORTH NAPLES FL 34102 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAUL R. DOHL 1285 GULF SHORE BLVD N NAPLES, FL 34102 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GRANT, GERALD JR. 1285 GULF SHORE BLVD, N NAPLES FL 34102 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BALL, FRANK R JR 1285 GULF SHORE BLVD N NAPLES FL 34102 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PUTZELL, EDWIN J 1285 GULF SHORE BLVD N NAPLES FL 34102 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDMUND H SORENSON 1285 GULF SHORE BLVD N NAPLES, FL 34102 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PASTRYK, R.G. 1285 GULF SHORE BLVD N NAPLES FL 34102 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* **3/4/03** **239-649-6346**

CR2E037 (10/02)

Attachment

**Wiebel, Hennells
& Carufe, P.A.**

Certified Public Accountants

728662
8052364

Douglas E. Wiebel, CPA Scott D. Hennells, CPA Nelida Carufe, CPA

To The Laurentians of Naples, Inc.

Date January 27, 2003

INSTRUCTIONS FOR FILING
2003 Uniform Business Report

- (1) Please review the form carefully. Make any changes or additions as needed.
- (2) Please sign and date the form.
- (3) There is \$61.25 due with the filing of this form. Check made payable to the Florida Department of State is enclosed.
- (4) Mail the signed return along with enclosed check to the Division of Corporations before May 1, 2003. A pre-addressed envelope is enclosed for your convenience.
- (5) Retain the attached "Client Copy" of this form in your files for future reference.

If you have any questions or require further assistance,
please contact us.