

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 26, 2001 8:00 am
Secretary of State

06-26-2001 90005 032 ****61.25

DOCUMENT # 728692

1. Entity Name

ADMIRALTY POINT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**2300 GULF SHORE BOULEVARD NORTH
 NAPLES FL 33940**

Mailing Address

**2300 GULF SHORE BOULEVARD NORTH
 NAPLES FL 33940**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

34103

Country

Zip

34103

Country

4. FEI Number

59-1648490

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FALK, STEPHEN M.
 850 PARKSHORE DR.
 NAPLES FL 34103**

Name

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

City

FL

Zip Code

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

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
 NAME **KARG, JAMES**
 STREET ADDRESS **2400 N GULF SHORE BLVD #302**
 CITY-ST-ZIP **NAPLES FL**

TITLE **D** ☐ Change ☒ Addition
 NAME **James Stephenson**
 STREET ADDRESS **2400 Gulf Shore Blvd., N. #804**
 CITY-ST-ZIP **Naples, FL 34103**

TITLE **VD** ☐ Delete
 NAME **WILCOX, DAVID**
 STREET ADDRESS **2307 GULF SHORE BLVD., N.**
 CITY-ST-ZIP **NAPLES FL**

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

TITLE **TD** ☐ Delete
 NAME **BORMAN, EARLE K**
 STREET ADDRESS **2354 GULF SHORE BLVD N**
 CITY-ST-ZIP **NAPLES FL**

TITLE **D** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **NICOLAY, BETTY**
 STREET ADDRESS **2384 GULF SHORE BLVD N**
 CITY-ST-ZIP **NAPLES FL 34103**

TITLE **D** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **WAYNE, KATHY**
 STREET ADDRESS **2400 GULF SHORE BLVD, NORTH #605**
 CITY-ST-ZIP **NAPLES FL 34103**

TITLE **SD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** ☐ Delete
 NAME **PECARO, BERNARD**
 STREET ADDRESS **2390 GULF SHORE BLVD NORTH**
 CITY-ST-ZIP **NAPLES FL 34103**

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 to an address with all other like empowered. **Bernard Pecaro,**

SIGNATURE: *Bernard Pecaro* **President**

941-262-3051 **6/15/2001**

CR20037 (10/00)