

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 02, 2000 8:00 am**  
**Secretary of State**

03-02-2000 90177 033 \*\*\*\*61.25

**DOCUMENT # 745196**

1. Entity Name

**MARINA TOWN CONDOMINIUM APARTMENTS ONE ASSOCIATI**

Principal Place of Business

Mailing Address

3454 HANCOCK BRIDGE  
 N FT MYERS FL 33903  
 US

P O BOX 1848  
 FORT MYERS FL 33902-1848  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1883068**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCEWEN, LYNN  
 13971 NORTH CLEVELAND AVENUE #3  
 NORTH FORT MYERS FL 33902

Name: **Van Tilburg, Lee J.**  
 Street Address (P.O. Box Number is Not Acceptable):  
**SilverCrested Management Inc.**  
**3440 Marinetown Lane 203 A**  
 City: **North Ft Myers** FL Zip Code: **33903**

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: **Lee J. Van Tilburg, CAM**  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  
 DATE: **2-22-00**  
 Title: **MANAGER**

**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	VPD	<input checked="" type="checkbox"/> Delete
NAME	STOCK, THOMAS	
STREET ADDRESS	3454 HANCOCK BRIDGE PKWY #B-13	
CITY-ST-ZIP	N FT MYERS FL 33903	
TITLE	PD	<input type="checkbox"/> Delete
NAME	RAINES, ELSIE	
STREET ADDRESS	3454 HANCOCK BRIDGE PKWY	
CITY-ST-ZIP	N FT MYERS FL 33903	
TITLE	SD	<input type="checkbox"/> Delete
NAME	NEWTON JOYCE	
STREET ADDRESS	3454 HENCOCK PKWY B9	
CITY-ST-ZIP	N FT MYERS FL 33903	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	KERLIN, CAROLYN	
STREET ADDRESS	3454 HANCOCK BRIDGE PARKWAY B10	
CITY-ST-ZIP	FORT MYERS FL 33903	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>NEWTON JOYCE</del> NEWTON JOYCE	
STREET ADDRESS	3454 HANCOCK BR PKWY B9	
CITY-ST-ZIP	No. Ft Myers, FL 33903	
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Giannetti, Anthony	
STREET ADDRESS	3454 HANCOCK BR. PKWY B2	
CITY-ST-ZIP	No. Ft Myers, FL 33903	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stock, Lisa	
STREET ADDRESS	3454 HANCOCK BR PKWY B13	
CITY-ST-ZIP	No. Ft Myers, FL 33903	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 19.07(2)(b), Florida Statutes, with the certification 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Lee J. Van Tilburg CAM**  
 Signature, typed or printed name of signing officer or director  
 DATE: **2/22/00**  
 Daytime Phone #: **1-941-995-5240**

CR2E037 (9/99)