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FILED
May 01, 2002 8:00 am
Secretary of State

03-12-2002 90278 019 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746907

1. Entity Name

CEDAR ARMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
824 S.E. 46TH ST APT 2-A CAPE CORAL FL 33904	% TERESA BASTONE 824 S.E. 46TH LANE., 2C CAPE CORAL FL 33904 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
824 S.E. 46TH STREET		% TERESA BASTONE	
Suite, Apt. #, etc.: APT 2-C		Suite, Apt. #, etc.: 824 S.E.46th St. 2-C	
City & State: CAPE CORAL, FL.		City & State: CAPE CORAL, FL.	
Zip: 33904	Country: LEE	Zip: 33904	Country: Lee

4. FEI Number: 59-1970797 ☐ 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
OLSON, BARBARA 1342 SE 46TH LANE STE 3 CAPE CORAL FL 33910	Name: TERESA BASTONE Street Address (P.O. Box Number is Not Acceptable): 824 S.E. 46TH STREET 2-C City: CAPE CORAL FL Zip Code: 33904

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: Teresa Bastone TERESA BASTONE DATE: 2/26/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PT BASTONE, TERESA 824 SE 46TH LANE 2C CAPE CORAL FL 33904 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P T BASTONE, TERESA 824 S.E. 46TH STREET 2C CAPE CORAL, FL. 33904 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD HAVLIN, RUTH 824 SE 46TH LANE 1C CAPE CORAL FL 33904 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD DEPASQUALE, ANNA 824 S.E.46TH STREET 1-C CAPE CORAL, FL. 33904 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MILER, LOUISE 47 STAGECOACH RD PATTERSON NY 12563 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP-D WOLF, INGEBORG 824 S.E. 46TH STREET 1-B CAPE CORAL, FL. 33904 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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: Teresa Bastone TERESA BASTONE Date: 2/26/02 Daytime Phone #: 941-945-7067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)