2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment wit

SIGNATURE:

FILED **DOCUMENT # 753939** Feb 16, 2000 8:00 am 1. Entity Name **Secretary of State** VANDERBILT YACHT & RACQUET CLUB CONDOMINIUM ASSO 02-16-2000 90050 026 ****61.25 Principal Place of Business Mailing Address 11030 GULF SHORE DRIVE 11030 GULF SHORE DRIVE NAPLES FL 34108-1745 NAPLES FL 34108 2. Principal Place of Business . 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2429289 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BOERGER, WALTER** 11030 GULF SHORE DR. NAPLES FL 34108 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME POPOWICH, JACK NAME STREET ADDRESS STREET ADDRESS 6905 GLEASON CIRCLE CITY-ST-ZIP CITY-ST-ZIP **EDINA MN 55439** ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME DEROBERTS, RICHARD STREET ADDRESS STREET ADDRESS 1270 MARLYN DR. CITÝ ST ŽIP CITY-ST-ZIP COLUMBUS OH 43220 Change ☐ Addition ☐ Delete TITLE DT TITLE NAME Galliers, William NAME STREET ADDRESS STREET ADDRESS 7 COUNTRY CLUB DR CITY-ST-ZIP CITY-ST-ZIE COLDWATER MI 49036 ☐ Change Addition TITLE D۷ ☐ Delete TITLE **BOERGER, WALTER** NAME STREET ADDRESS STREET ADDRESS 11030 GULF SHORE DR #301 CITY-ST-ZIP CITY-ST-ZIP NAPLES F Change ☐ Addition TITLE ☐ Delete TITLE FISHER, ROBERT NAME STREET ADDRESS STREET ADDRESS 610 COLUMBUS AVE CITY-ST-ZIP CITY-ST-ZIP SANDUSKY OH ☐ Addition Change ☐ Delete TITLE REINECKER, CHARLES NAME NAME STREET ADDRESS STREET ADDRESS 5218 SCENERY DR CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 12. I hereby certify that the information supplied with this filling 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

Daytime Phone #