

2001 UNIFORM BUSINESS REPORT (UBR)

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

03-26-2001 90144 023 ****61.25

UBR 2100

DOCUMENT # 757958

1. Entity Name
THE STRATFORD AT PELICAN BAY CONDOMINIUM ASSOCIA

Principal Place of Business 5601 TURTLE BAY DRIVE SUITE 100 NAPLES FL 33963	Mailing Address 5601 TURTLE BAY DRIVE SUITE 100 NAPLES FL 33963
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5601 TURTLE BAY DRIVE Suite, Apt. #, etc.	3. Mailing Address 5601 TURTLE BAY DRIVE Suite, Apt. #, etc.
Main Office City & State Naples FL 34108-2746	Main Office City & State Naples FL 34108-2746
Zip Collier	Country Collier

4. FEI Number 59-2300102	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HACK, DAVID
5601 TURTLE BAY DR #100
NAPLES FL 34108

7. Name and Address of New Registered Agent

Name
Andrew Steinhubl

Street Address (P.O. Box Number is Not Acceptable)
5601 Turtle Bay Dr. #1104

City
Naples FL

Zip Code
34108

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 *Andrew Steinhubl* **Andrew Steinhubl** **03/23/01**
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. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GILMAN, LEIGHTON 5601 TURTLE BAY DR NAPLES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S POWERS, JAMES 5601 TURTLE BAY DR NAPLES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ADAMS, JOHN 5601 TURTLE BAY DRIVE NAPLES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALLABAN, CAROLYN 5601 TURTLE BAY DR NAPLES FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HACK, DAVID 5601 TURTLE BAY DRIVE NAPLES FL 34108	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAWLER, EUGENE P 5601 TURTLE BAY DR NAPLES FL	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-T GILMAN, LEIGHTON 5601 Turtle Bay Dr. #603 Naples FL 34108	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POWERS, JAMES 5601 Turtle Bay Dr. #2204 Naples FL 34108	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, JOHN 5601 Turtle Bay Dr. #604 Naples FL 34108	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THORNER, FRITZI 5601 Turtle Bay Dr. # 504	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEINHUBL, ANDREW 5601 Turtle Bay Dr., #1104	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. PORTER (Tom) HARRY 5601 Turtle Bay Dr. #1101 Naples FL 34108	<input type="checkbox"/> Change <input checked="" 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: *Andrew Steinhubl* **Andrew Steinhubl** **941-597-3501**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)