

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 758457

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: THE COURTYARDS OF GOLDEN GATE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

R & P MANAGEMENT
265 AIRPORT RD. S
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

R & P MANAGEMENT
265 AIRPORT RD. S
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-2232258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT ASSOCIATES
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAHN, LEWIS
Address: 4281 22ND AVE. SW #79
City-St-Zip: NAPLES, FL 34116

Title: SD () Delete
Name: BARNUM, ROSE
Address: 4331 22 AVE, SW #71
City-St-Zip: NAPLES, FL 34116

Title: TD () Delete
Name: BARNUM, HAROLD
Address: 4331 22 AVE SW #71
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SNYDER, SHRILEY
Address: 4261 22ND AVE SW #81
City-St-Zip: NAPLES, FL 34116

Title: TD (X) Change () Addition
Name: TERRIT, TONY
Address: 4261 22ND AVE SW #82
City-St-Zip: NAPLES, FL 34116

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEWIS KAHN

PD

04/30/2002

Electronic Signature of Signing Officer or Director

_____ Date