2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2001 8:00 am
Secretary of State
04-28-2001 90045 015 ****61.25

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646239

DO NOT WRITE IN THIS SPACE

1. Entity Name

BOCA CIEGA MANOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
187 FOREST LAKES BLVD. NAPLES FL 34105	187 FOREST LAKES BLVD. NAPLES FL 34105

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 59-2168247 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GRACEY, ROBERT T.
187 FOREST LAKES BLVD.
NAPLES FL 33942

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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)

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	PD SPADACCINI, MARILYN 2045 PINE ISLE LANE NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD JOHNSTONE, JANE 2048 PINE ISLE LANE NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CAMANDONA, EMILE 2041 PINE ISLE LANE NAPLES FL 34112	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CISZEWSKI, FRANCES 3718 KENT DR. NAPLES, FL 34112	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS GRACEY, ROBERT T. 187 FOREST LAKES BLVD. NAPLES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MARTIN, JENNY 2026 PINE ISLE LANE NAPLES, FL 34112	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAYES, FRANK 2093 PINE ISLE LANE NAPELS FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CADELUCK, HENRY 2052 PINE ISLE LANE NAPLES, FL 34112	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VANDERSLUIS, JEANNE 2085 PINE ISLE LANE NAPLES FL 34112	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAHAM, RONALD 2065 PINE ISLE LANE NAPLES, FL 34112	☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED Robert T. Gracey 4/12/01 941-649-5662
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #