2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State
03-09-2001 90003 039 ****61.25

DOCUMENT # 762086

1. Entity Name

CAPTAIN'S HARBOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O HENKE PROPERTY MANAGEMENT 6212-A PRESIDENTIAL CT FT MYERS FL 33919 US	C/O HENKE PROPERTY MANAGEMENT 6212-A PRESIDENTIAL CT FT MYERS FL 33919 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
c/o Paragon Financial Svcs	c/o Paragon Financial
Suite, Apt. #, etc.: 8270 College PKWY #104	Suite, Apt. #, etc.: 8270 College PKWY #104
City & State: Fort Myers FL	City & State: Fort Myers FL
Zip: 33919 Country: USA	Zip: 33919 Country: USA

4. FEI Number: 59-2443538 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HENKE, CAROL J
C/O HENKE PROPERTY MANAGEMENT
6212-A PRESIDENTIAL CT
FT MYERS FL 33919

7. Name and Address of New Registered Agent

Name: CONRAD, DEBBIE
Street Address (P.O. Box Number is Not Acceptable): C/O PARAGON FINANCIAL SERVICES
8270 COLLEGE PKWY #104
City: FORT MYERS FL Zip Code: 33919

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: Debbie Conrad Debbie Conrad, Agent 3/5/01
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. ☐ **$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 FISCHER, DALE 16276 NAUTICAL WAY BOKEELIA FL 33922	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SAVOURY, CLINTON 7660 CAPTAINS HARBOR DR., #302 BOOKEELIA FL 33922	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD WERLY, ROGER 7565 CAPTAINS HARBOR DR #602 BOKEELIA, FL 33922	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FAULKNER, MICHAEL 7660 CAPTAINS HARBOR DR., #306 BOOKEELIA FL 33922	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GENTRY, RICHARD 7660 CAPTAINS HARBOR DR., #1304 BOOKEELIA FL 33922	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD STICKLER, TED 7628 CAPTAINS HARBOR DR # 405 BOKEELIA, FL 33922	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BAILEY, NORM 7628 CAPTAIN HARBOR DR., #402 BOKEELIA FL 33922	☐ 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

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] Treas May 2, 2001 283 2691
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #