

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90163 025 ****61.25

DOCUMENT # 768958

1. Entity Name

SANDPIPER WEST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1625 CHESAPEAKE AV
 #101
 NAPLES FL 34102

1625 CHESAPEAKE AV
 #101
 NAPLES FL 34102-0500

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0059155

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARRIOTT, SARA
 2614 TAMiami TRAIL NORTH
 #701
 NAPLES FL 34103

Name

Charles D Holliday

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

1625 Chesapeake Ave #101

City

NAPLES

FL

Zip Code

34102

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

Charles D Holliday

Charles D Holliday

4-18-00

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	PD	<input type="checkbox"/> Delete
NAME	HOLIDAY, DAVID	
STREET ADDRESS	1625 CHESAPEAKE #101	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	PSD	<input type="checkbox"/> Delete
NAME	MARRIOTT, SARA	
STREET ADDRESS	2614 TAMiami TRAIL N #701	
CITY-ST-ZIP	NAPLES FL 34103	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MCKINNEY, ALYSA	
STREET ADDRESS	1625 CHESAPEAKE AVE #203	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	D	<input type="checkbox"/> Delete
NAME	GORSKI, ANTHONY	
STREET ADDRESS	3442 BIRCH ST	
CITY-ST-ZIP	FRANKLIN PARK IL 60131	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GEORGE, HELEN	
STREET ADDRESS	1625 CHESAPEAKE #103	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLLIDAY CHARLES D.	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Charles D Holliday
 SANDPIPER WEST CONDOMINIUM ASSOCIATION, INC.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)