## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 849443** 

Title:

Name:

Address: City-St-Zip: AS

DEPAUW, ANJA

4921 22ND AVE SW

NAPLES, FL 34116

(X) Delete

Entity Name: COMMONAGE CORPORATION

FILED Apr 22, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1100 5TH AVE. SO 1100 FIFTH AVENUE SOUTH 201 201 NAPLES, FL 34102 NAPLES, FL 34102 **Current Mailing Address: New Mailing Address:** 1100 FIFTH AVENUE SOUTH 1100 5TH AVE. SO NAPLES, FL 33940 US NAPLES, FL 33940 US FEI Number: 59-2100440 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION COMPANY OF MIAMI % SHUTTS & BOWEN 201 S BISCAYNE BLVD MIAMI, FL 33131 US 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CONNOR, SYLVIA Name: Name: 1486 NORTHGATE DRIVE Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: ( ) Delete Title: PTD Title: () Change () Addition WANKLYN, JOHN A. Name: Name: 1100 5TH AVE SO. STE # 201 Address: Address: NAPLES, FL 34102 City-St-Zip: City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN A WANKLYN P 04/22/2003

() Change () Addition