

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H98970

1. Entity Name

TGT OF NAPLES, INC.

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90018 038 ***158.75

Principal Place of Business

Mailing Address

219 COLONADE CIRCLE
NAPLES FL 34103

219 COLONADE CIRCLE
NAPLES FL 29926-2291

2. Principal Place of Business

3. Mailing Address

550 COLONIAL DRIVE

550 COLONIAL DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

HILTON HEAD ISLAND, SC

City & State

HILTON HEAD ISLAND, SC

4. FEI Number

59-2651606

Applied For

Not Applicable

Zip

29926

Country

USA

Zip

29926

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RASMUSSEN, WILLIAM F.
219 COLONADE CIRCLE
NAPLES FL 34103

Name

CRAIG T. HUPP, CPA

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

6200 CYPRESS HOLLOW WAY

City

NAPLES

FL

Zip Code

34109

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/18/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CP ☐ Delete
NAME RASMUSSEN, WILLIAM F.
STREET ADDRESS 219 COLONADE CIRCLE
CITY-ST-ZIP NAPLES FL 34103

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 550 COLONIAL DRIVE
CITY-ST-ZIP HILTON HEAD ISLAND, SC 29926

TITLE S ☐ Delete
NAME RASMUSSEN, LOIS A.
STREET ADDRESS 219 COLONADE CIRCLE
CITY-ST-ZIP NAPLES FL 34103

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 550 COLONIAL DRIVE
CITY-ST-ZIP HILTON HEAD ISLAND, SC 29926

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/00

Date

843-342-5381

Daytime Phone #