2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # J60176** 1. Entity Name NAPLES PROPERTIES, INC. 04-30-2001 90350 026 ***158.75 Mailing Address Principal Place of Business 4500 EXECUITIVE DRIVE 4500 EXECUITIVE DRIVE SUITE 300 SUITE 300 NAPLES FL 34119 NAPLES FL 34119 US US 2. Principal Place of Business 3. Mailing Address **SHEANG** 5672 Steam 5672 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. DUITE DUITE Applied For City & State 4. FEI Number City & State 59-2788631 Not Applicable JAPLES Country \$8.75 Additional Country 5. Certificate of Status Desired u 50 Fee Required <u>SA</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JANE+ KELLY, JANET Street Address (P.O. Box Number is Not Acceptable 4500 EXEC. DR STRANO SUITE 300 NAPLES FL 34119 Zip Code **3**4110 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** ruired when reinstating) FILE NOW!!! FEE IS \$150.00 ation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE HARDY Robert HARDY, ROBERT 5692 STRAND CT NAME 4500 EXECUTIVE WAY, STE 240 STREET ADDRESS STREET ADDRESS NAPLES, FL 34110 NAPLES FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete HARDY, Robert PAUL TITLE HARDY, ROBERT PAUL NAME NAME 5692 STRAND CT. #1 4500 EXECUTIVE DR STREET ADDRESS STREET ADDRESS NAPLES, FL 34110 NAPLES FL CITY-ST-ZIP CITY-ST-ZIP Addition TITI F Delete HESSE, SANDRA 6289 BURN HAM ROAD HESSE, SANDRA NAME NAME 4500 EXECUTIVE DRIVE STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-7IP CITY-ST-ZIP Addition Delete TITLE TITLE LELLY, JANET KELLY, JANET NAME NAME 5672 STRAND CT. 4500 EXEC DR, STE 300 STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP JAPLES, FL 84110 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/01 (94) 597-9888

CR2E034 (10/00)