

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 27, 2001 8:00 am**  
**Secretary of State**

06-27-2001 90290 007 \*\*\*150.00

DOCUMENT # **49419**

1. Entity Name **NAPLES GO CART CENTER, INC**

Principal Place of Business Mailing Address

**5480 Treetops Lane**  
**NAPLES, FL 34109**

**772694**

2. Principal Place of Business 3. Mailing Address

**5480 Treetops Lane**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

**NAPLES FL**

4. FEI Number **65-0086103** Applied For Not Applicable

Zip Country Zip Country

**34112**

**USA**

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

**Gregory Zaro**  
**432 PINE LAKE DR**  
**NAPLES, FL 34112**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 **Gregory Zaro** **PROS** **MAY 1-01**  
 (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

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, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>PRES. and ALL SEAS</b>			
	<b>GREGORY P. ZARO</b>	<b>432 PINE LAKE DR.</b>	<b>NAPLES, FL 34112</b>	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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: **Gregory Zaro** **PROS** **MAY 1 01** **941-775 1243**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)

Attachment  
D#K49419  
772684

June 21, 2001

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern,

Naples Go Cart Center, Inc. had a change of address and we did not receive the corporate dues form for this year. We are enclosing a check for \$150.00 for this years dues and would like any fees and penalties waived. Enclosed you will find the corporate form and check to bring this account current.

~~Thank you for your attention to this matter. If you have any questions please call~~  
941-348-2724.

Respectfully,

  
Gregory P. Zaino/President