

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90017 010 ***150.00

DOCUMENT # L37611

1. Entity Name

FALLING WATERS RECREATIONS, INC.

Principal Place of Business

**7200 DAVIS BLVD.
NAPLES FL 33962
US**

Mailing Address

**7200 DAVIS BLVD.
NAPLES FL 33962
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0162052**

Applied For

Not Applicable

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

**SIESKY, JAMES H.
1000 NO. TAMiami TRAIL
SUITE 201
NAPLES FL 33940-6777**

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

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **ANTENUCCI, ALBO J JR**
STREET ADDRESS **100 S. BEDFORD RD.**
CITY-ST-ZIP **MT. KISCO NY 10549**

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

TITLE **SD** ☐ Delete
NAME **FRIEDLAND, GARY**
STREET ADDRESS **100 S. BEDFORD RD.**
CITY-ST-ZIP **MT. KISCO NY 10549**

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

TITLE **D** ☐ Delete
NAME **MALODY, PATRICK**
STREET ADDRESS **7200 DAVIS BLVD**
CITY-ST-ZIP **NAPLES FL 34104**

TITLE ☐ Change ☐ Addition
NAME **malody, Patrick**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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

Date

Daytime Phone #

CR2E034 (10/00)



Attachment#
L37611

518259

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 14, 2001

FALLING WATERS RECREATIONS, INC.
7200 DAVIS BLVD.
NAPLES, FL 33962 US

SUBJECT: FALLING WATERS RECREATIONS, INC.
Ref. Number: L37611

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Both the annual report/uniform business report and the filing fee must be received by our office together in order to be processed.

Please return the corrected documents to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

Cathy Cave
ANNUAL REPORTS SECTION

Letter number: 001A00015646

Director's Office

Attachment#
L37611

3/07/01

CORPORATE DETAIL RECORD SCREEN

3:45 PM

NUM: L37611

ST:FL ACTIVE/FL PROFIT- --

FLD: 12/18/1989

518259

FEI#: 65-0162052

NAME : FALLING WATERS RECREATIONS, INC.

CHANGED: 06/07/94

PRINCIPAL: 7200 DAVIS BLVD.

ADDRESS NAPLES, FL 33962 US

RA NAME : SIESKY, JAMES H.

NAME CHG: 06/03/93

RA ADDR : 1000 NO. TAMIAMI TRAIL

ADDR CHG: 06/03/93

SUITE 201

NAPLES, FL 33940-6777 US

ANN REP : (1998) B 05/06/98 (1999) A 05/07/99 (2000) A 04/03/00

1. MENU, 3. OFFICERS

ENTER SELECTION AND CR: