2002 UNIFORM BUSINESS REPORT (UBR)

May 29, 2002 8:00 am Secretary of State DOCUMENT # N00000000426 1. Entity Name 04-18-2002 90442 037 ****61.25 CLIPPER COVE AT BAL HARBOR II CONDOMINIUM ASSOCI Principal Place of Business Mailing Address 2000 BAL HARBOR BLVD PO ROX 390758 PUNTA GORDA FL MURDOCK FL 33938 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1116888 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ivame WISHARD, KRISTINE Street Address (P.O. Box Number is Not Acceptable) 2200 KINGS HIGHWAY 3J PORT CHARLOTTE FL 33980 City 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. Election Campaign Financing FILE NOW: FEE IS \$61,25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE X Delete TITLE (9/01) Change X Addition BOFF, JOSEPH D Marilyn Hiltz NAME MAME 8401 INDIAN WELLS WAY STREET ADDRESS 2000 Bal Harbor Blvd #912 STREET ADDRESS E037 CITY-ST-ZIP NAPLES FL 34113 CITY-ST-ZIP Punta Gorda, FL 33950 TITLE (X) Delete TITLE ☐ Change X Addition WILSON, TERI NAME Robert Kroeger NAME 942 N COLLIER BLVD STREET ADDRESS 2000 Bal Harbor Blvd #822 STREET ADDRESS CITY- ST- 7/2 MARCO ISLAND FL 34145 CITY-ST-ZIP Punta_Gorda,_FL__33950 TITLE X Delete TITLE ☐ Change **Addition** Oyer, Steve. NAMÉ Robert <u>Pierpont</u> : NAME STREET ADDRESS 928 NORTH COLLIER BLVD STREET ADDRESS 2000 Bal Harbor Blvd #1011 CITY-ST-ZIF MARCO ISLAND FL 34145 CITY-ST-ZIP Punta Gorda, FL 33950 TITLE Oelete TITLE ☐ Change ★ Addition NAME NAME Sharmaine Edginton STREET ADDRESS STREET ADDRESS 2000 Bal Harbor Blvd #923 CITY-ST-ZIP CITY-ST-ZIP Punta Gorda, FL 33950 TITLE Delete TITLE ☐ Change **X** Addition NAME Kenneth Eitenmiller NAME STREET ADDRESS STREET ADDRESS 2000 Bal Harbor Blvd #811 CITY-ST-ZIP CITY-ST-ZIP Punta Gorda, FL 33950 TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Date

CITY-ST-7)P

SIGNATURE:

CITY-ST-ZIP