

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
 05-28-2002 91791 047 ****61.25

DOCUMENT # N00000001370

1. Entity Name

BAYFRONT CONDO OF NAPLES, INC.

Principal Place of Business

2150 GOODLETTE RD. SUITE 700
 NAPLES FL 34102

Mailing Address

P.O. BOX 9709
 NAPLES FL 34101-9709

2. Principal Place of Business

401-451 Bayfront Place

3. Mailing Address

Suite, Apt. #, etc.

City & State

Naples FL

City & State

Zip

Country

Zip

Country

Zip

Country

4. FEI Number

65-0986111

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HART, STEPHEN P
4985 EAST TAMiami TRAIL
NAPLES FL 34113

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	MANN, MITCH	
STREET ADDRESS	401 BAYFRONT PLACE #3303	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	VPD	☒ Delete
NAME	GABB, GEORGE	
STREET ADDRESS	451 BAYFRONT PLACE #5206	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	VPD	☒ Delete
NAME	PFLUEGER, JOHN	
STREET ADDRESS	401 BAYFRONT PLACE #3503	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	TD	☒ Delete
NAME	CORMIER, MARGARET	
STREET ADDRESS	451 BAYFRONT PLACE #5202	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	SD	☒ Delete
NAME	DELUCA, TERESE	
STREET ADDRESS	451 BAYFRONT PLACE #5406	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	Kay Wilson	
STREET ADDRESS	3564 Windjammer Circle #1203	
CITY-ST-ZIP	Naples FL 34112	
TITLE	VD	☐ Change ☒ Addition
NAME	Barbara Morley	
STREET ADDRESS	401 Bayfront Pl # 3205	
CITY-ST-ZIP	Naples FL 34102	
TITLE	SD	☐ Change ☒ Addition
NAME	Richard Perry	
STREET ADDRESS	451 Bayfront Place #5504	
CITY-ST-ZIP	Naples FL 34102	
TITLE	TD	☐ Change ☒ Addition
NAME	Kenneth Fleming	
STREET ADDRESS	450 Bayfront Place #4206	
CITY-ST-ZIP	Naples FL 34102	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/02 239-514-7432

Date

Daytime Phone #

CR2E037 (9/01)