

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 12, 2002 8:00 am
Secretary of State

05-13-2002 90038 023 ****61.25

DOCUMENT # N00000001895

1. Entity Name

SUNSET CAY VILLAS IX CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business

Mailing Address

4500 EXECUTIVE DR
 STE 100
 NAPLES FL 34119
 US

4500 EXECUTIVE DR
 STE 100
 NAPLES FL 34119
 US

2. Principal Place of Business

3. Mailing Address

12734 Kenwood Lane

12734 Kenwood Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Su. 49

Suite 49

City & State

City & State

Ft. Myers FL

Ft. Myers FL

Zip

Country

Zip

Country

33907

USA

33907

USA

8. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STANLEY, JOHN F
 2660 AIRPORT RD. SOUTH
 NAPLES FL 34112

Name

Tropical Isler Management Services

Street Address (P.O. Box Number is Not Acceptable)

12734 Kenwood Ln., Suite 49

City

Ft. Myers

FL

Zip Code

33907

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

Don Redding

Don Redding, CAM

4/20/02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☒ Delete
NAME	HARDY, ROBERT S	
STREET ADDRESS	6289 BURNHAM RD.	
CITY-ST-ZIP	NAPLES FL 34119	
TITLE	D	☒ Delete
NAME	BURGESSON, RICHARD	
STREET ADDRESS	4500 EXECUTIVE DR., STE. 100	
CITY-ST-ZIP	NAPLES FL 34119	
TITLE	D	☒ Delete
NAME	COLSON, KARI	
STREET ADDRESS	4500 EXECUTIVE DR., STE. 100	
CITY-ST-ZIP	NAPLES FL 34119	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	☐ Change ☒ Addition
NAME	Molberg, David	
STREET ADDRESS	290 Newport Dr. #108	
CITY-ST-ZIP	Naples, FL 34114	
TITLE	D	☐ Change ☒ Addition
NAME	Sload, Rosemary	
STREET ADDRESS	290 Newport Dr. #106	
CITY-ST-ZIP	Naples, FL 34114	
TITLE	D	☐ Change ☒ Addition
NAME	Ballard, Julianne	
STREET ADDRESS	290 Newport Dr. #107	
CITY-ST-ZIP	Naples, FL 34114	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR02037 (9/01)

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:

David Molberg
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

(Date)

941-324-1902

508-759-6185

Daytime Phone #

25015T