

FILED
Jun 12, 2003 8:00 am
Secretary of State

04-25-2003 90319 026 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

4
4/2

DOCUMENT # N00000002256			
1. Entity Name TURTLE BAY I AT BRIDGEWATER BAY CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 2655 TRADE CENTER WAY NAPLES FL 34109		Mailing Address 2655 TRADE CENTER WAY NAPLES FL 34109	
2. Principal Place of Business 10 Southwest Property Mgmt 1044 Castello Dr, #206 Naples, FL 34103 USA		3. Mailing Address [Redacted]	
4. FEI Number 59-3716380		☐ CHECK HERE IF MAKING CHANGES	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent KETCHUM, SCOTT M 4001 TAMiami TRAIL NORTH STE. 300 NAPLES FL 34103		7. Name and Address of New Registered Agent Southwest Property Management Corp. 1044 Castello Dr, #206 Naples, FL 34103	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing)			
FILE NOW: FEE IS \$81.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COTTER, JEFFREY J 90 MONNEHAMA CIRCLE Maitland FL 32751	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD- Davidson, Doug D 3060 Horizon Ln, #1401 Naples, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, G. STUART 25089 PINEWATER COVE LANE BONITA SPRINGS FL 34134	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD- Epstein, Ted D 3063 Horizon Ln, #1502 Naples, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WENDT, PETER W 14588 JONATHAN HARBOUR DRIVE FORT MYERS FL 33908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD- Crice, Ernest D 3060 Horizon Ln, #1407 Naples, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 of the like information.			
SIGNATURE: [Signature]		5-14-03 Ted Epstein Secy.	
SIGNATURE: [Signature]		4-14-03	