

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

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90268 002 ****61.25

DOCUMENT # N00000007581



1. Entity Name
**NAPLES BOAT CLUB BUILDING THREE CONDOMINIUM ASSO
CIATION, INC.**

Principal Place of Business
**899 TENTH STREET SOUTH
NAPLES FL 34102**

Mailing Address
**899 TENTH STREET SOUTH
NAPLES FL 34102**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
909 10th Street South

3. Mailing Address
909 10th Street South

Suite, Apt. #, etc.
#101

Suite, Apt. #, etc.
#101

City & State
Naples, FL

City & State
Naples, FL

Zip Country
34102 USA

Zip Country
34102 USA

4. FEI Number **01-0636558** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SWANSON, JOHN C
899 TENTH STREET SOUTH
NAPLES FL 34102**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOEBEL, JOHN L 211 N. BROADWAY #3600 ST. LOUIS MO 63102-2750	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WETTERAU, TED C 211 N. BROADWAY #3600 ST. LOUIS MO 63102-2750	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD G. FRED HEIMBURGER 211 N. BROADWAY #3600 ST. LOUIS MO 63102-2750	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RUFF, EDWARD J 4760 TAMiami TRAIL NORTH NAPLES FL 34103	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD SWANSON, JOHN C 899 TENTH STREET SOUTH NAPLES FL 34102	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Peter R. Peterson 2305 Pinewoods Circle Naples, FL 34105	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Larry Coates 199 Camden Road NE Atlanta, GA 30309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Jerry Baumgartner P.O. Box 50949 Ft. Myers, FL 33994-0949	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Carol Waxler 110 North Dixie Highway Stuart, FL 34994	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD John C. Swanson	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 other like empowered.

SIGNATURE: _____

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-03 239.430.7994

Date Daytime Phone #

CR2E037 (10/02)