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

DO NOT WRITE IN THIS SPACE

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DOCUMENT #	N01000000673
1. Entity Name	

MUSTANG ISLAND HOMEOWNERS ASSOCIATION, INC.



03 AUG 20 PH 12: 47

SECRETARY OF STATE TALLAHASSEE, FLORIDA



2. Principal Place of Business Mailing Address 5692 Strand Court 5692 Strand Court Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Naples, FL City & State Applied For 4. FEI Number 65-1083655 Naples, FL Not Applicable Zip 34110 Country Country \$8.75 Additional UŠĀ 5. Certificate of Status Desired USA Fee Required 7. Name and Address of Current Registered Agent Name Timothy J. Ruemler DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 5801 Pelican Bay Boulevard, Suite 600 City Naples, Zip Code

Napres, TL 34108

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 Signature, trobad or printed dama of registered agent and title it as

FEE IS \$61.25

Sinitial or Amended UBR

09/04/03--01071--001 **61.25

DATE

(NOTE. Registered Agent signature required when reinstating)

9. Election Campaign Financing \$5,00 Ma

Trust Fund Contribution.

\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State

10, OFFICERS AND DIRECTORS TITLE DP - Ted Mosher NAME STREET ADDRESS MAME 5692 Strand Court STREET ADDRESS Naples, FL 34110 CITY ST ZIP CITY-ST-ZIP **DVP- Timothy Scarsella** MALA NAME: 5692 Strand Court STREET ADDRESS STREET ADDRESS Naples, FL 34110 CITY-ST-ZIP TITLE **DST-Diana Unsinn** MAME NAME 4. La 5692 Strand Court STREET ADDRESS STREET ADDRESS DO NOT WRITE Naples, FL 34110 CITY: ST-ZIP CITY - ST - ZIP TITLE PA TITLE IN THIS SPACE MAME STREET AUDRESS STREET ADDRESS CITY-ST-ZIP CITY ST. ZIP. TITLE TITLE NAME . NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST. ZIP TITLE mit. 🔠 NAME NAMÈ ... STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP

12. Thereby 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 it 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 on an attachment with an address, with all pitter like empowered.

SIGNATURE:

Eller Ted Mosher

08/01/03

239-598-4145

Date

Daytime Phone #