

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90024 028 ****61.25

DOCUMENT # N01881

1. Entity Name

THE WINDSTAR MASTER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4029 LIGHTHOUSE LANE
 NAPLES FL 34112
 US

4029 LIGHTHOUSE LANE
 NAPLES FL 34112
 US

2. Principal Place of Business

1700 WINDSTAR BLVD

Suite, Apt. #, etc.

3. Mailing Address

1700 WINDSTAR BLVD

Suite, Apt. #, etc.

City & State

NAPLES FL

City & State

NAPLES FL

Zip

34112

Country

USA

Zip

34112

Country

USA

4. FEI Number

65-0071194

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NAPLES LAWDOCK, INC.
4501 TAMiami TRAIL NORTH, SUITE 300
NAPLES FL 34103

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 | VPD | <input type="checkbox"/> Delete |
| NAME | SOLLECITO, JOHN | |
| STREET ADDRESS | 3554 HALDEMAN CREEK DR., #115 | |
| CITY-ST-ZIP | NAPLES FL 34112 | |
| TITLE | TD | <input type="checkbox"/> Delete |
| NAME | RIPPERGER, LOUIS | |
| STREET ADDRESS | 2149 PAGET CIRCLE | |
| CITY-ST-ZIP | NAPLES FL 34112 | |
| TITLE | SD | <input type="checkbox"/> Delete |
| NAME | BERETTA, VICTOR | |
| STREET ADDRESS | 3520 HALDEMAN CREEK DR., #102 | |
| CITY-ST-ZIP | NAPLES FL 34112 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | HAYES, JACK | |
| STREET ADDRESS | 1630 STARPOINTE LN | |
| CITY-ST-ZIP | NAPLES FL 34112 | |
| TITLE | PD | <input type="checkbox"/> Delete |
| NAME | FINK, JACK | |
| STREET ADDRESS | 1713 YORK ISLAND DR | |
| CITY-ST-ZIP | NAPLES FL 34112 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | HARKINS, JOSEPH | |
| STREET ADDRESS | 2137 PAGET CIRCLE | |
| CITY-ST-ZIP | NAPLES FL 34112 | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--------------------------------------|--|
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | HYLAND, WILLIAM | |
| STREET ADDRESS | 4771 YACHT HARBOR DRIVE | |
| CITY-ST-ZIP | NAPLES, FL 34112 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | KRUGGEL, GEORGE | |
| STREET ADDRESS | 3535 WINDJAMMER CIRCLE, #2004 | |
| CITY-ST-ZIP | NAPLES, FL 34112 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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:

JOSEPH HARKINS, PRESIDENT

Date

Daytime Phone #

4/8/02 941-732-0616

CR2E037 (9/01)