


FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90945 005 ****70.00

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

DOCUMENT # N02000000905	
1. Entity Name SAVE VANDERBILT BEACH FUND, INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10701 GULFSHORE DR Suite, Apt. #, etc. MANAGERS OFFICE City & State NAPLES, FL Zip 34108		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 32-00-69247		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name RICHARD BING	
	Street Address (P.O. Box Number is Not Acceptable) 10951 GULFSHORE DR	
	City NAPLES	FL 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 **RICHARD BING** *R B* **4-1-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(PD) RICHARD BING 10951 GULFSHORE DR NAPLES, FL 34108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(PD) DIANE KETCHAM 10562 GULFSHORE DR NAPLES, FL 34108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(TD) C.J. FIELDS 10691 GULFSHORE DR NAPLES, FL 34108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(SD) JOE CONNOLLY 10633 GULFSHORE DR NAPLES, FL 34108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) GORDON DIX 10573 GULFSHORE DR NAPLES, FL 34108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) WILLIAM ELINE 11030 GULFSHORE DR NAPLES, FL 34108	TITLE 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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE: *CJ Fields* **C.J. FIELDS** **4-1-03** **239-598-5351**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/02)