2000 UNIFORM BUSINESS REPORT (UBR)

4/25 4/2

FILED
Jul 10, 2000 8:00 am
Secretary of State
04-25-2000 90136 019 ****61.25

DOCUMENT # N05702

1. Entity Name

NAUTIQUE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% CORAL PROPERTY MANAGEMENT GROUP 826 S.E. 46TH LANE CAPE CORAL FL 33904	% CORAL PROPERTY MANAGEMENT GROUP 826 S.E. 46TH LANE CAPE CORAL FL 33904-6818

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2702332 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FITZGEORGE, ELAINE D. CORAL PROPERTY MANAGEMENT GROUP 826 S.E. 46TH LANE CAPE CORAL FL 33904	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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FLANAGAN, TOZIA 804 MOHAWK PKWY CAPE CORAL FL 33914	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DUDLEY, FRED 4010 SKYLINE BLVD CAPE CORAL FL 33914	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ ~~MCLAUGHLIN, KATHLEEN~~ ~~804 MOHAWK PARKWAY~~ CAPE CORAL FL 33914	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCLAUGHLIN, KATHLEEN 804 MOHAWK PKWY CAPE CORAL, FL 33914 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ ~~WORKMAN, JANICE~~ ~~4010 SKYLINE BLVD~~ ~~CAPE CORAL FL 33914~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HARTWIG, EILEEN 907 HART STREET HARVARD IL 60033	☒ 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	VP-O HELGA CLEMMENT 4010 SKYLINE BLVD #109 CAPE CORAL FL 33914 ☐ Change ☒ Addition

CR2E037 (9/99)

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: Elaine D. Fitzgeorge 04/07/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Sorry
THANK YOU