

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

FILED
Jun 12, 2003 8:00 am
Secretary of State

05-30-2003 90081 044 ****61.25

DOCUMENT # N05702

1. Entity Name

NAUTIQUE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

% C-21 SUNBELT REALTY
506 SW 47TH TERRACE
CAPE CORAL FL 33914

Mailing Address

% C-21 SUNBELT REALTY
506 SW 47TH TERRACE
CAPE CORAL FL 33914

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-2702332**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ZUNINO, AUGUST
506 SW 47TH TERRACE
CAPE CORAL FL 33914

7. Name and Address of New Registered Agent

Name

Paola Zunino

Street Address (P.O. Box Number is Not Acceptable)

Century 21 Sunbelt Realty
506 SW 47th Terr

City

Cape Coral

FL

Zip Code

33914

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

Paola Zunino

5/21/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

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	STD SMITH, MARLENE 241 PONDEROSA DRIVE LACHINE MI 49753	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HIGDON, JACK 102 SE 41ST CAPE CORAL FL 33905	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS NYKOWSKI, ELYNOR 4010 SKYLINE BLVD. #109 CAPE CORAL FL 33914	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jack Higdon 102 SE 41ST ST. Cape Coral, FL 33905	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Tozia Flanagan 804 Mohawk Pkwy 103 Cape Coral FL 33914	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Marlene Smith 241 Ponderosa Dr. Lachine, MI 49753	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bill Tolson 4010 Skyline Blvd #110 Cape Coral, FL 33914	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Karen Deitrick 714 SW 51 Terr Cape Coral, FL 33914	☐ Change ☐ 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 817, 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

5-21-03

289-945-1001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)