2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N11039

FEI Number: 59-2830286

in the State of Florida.

Entity Name: THE CITADEL CONDOMINIUM ASSOCIATION, INC.

Apr 30, 2002 8:00 AM Secretary of State

Certificate of Status Desired ()

Current Principal Place of Business: New Principal Place of Business:

9845 CITADEL LANE CITADEL LANE

UNIT #100 BONITA SPRINGS, FL 34135

BONITA SPRINGS, FL 34135

New Mailing Address: **Current Mailing Address:**

9845 CITADEL LANE PO BOX 2507

FEI Number Applied For ()

UNIT #100 BONITA SPRINGS, FL 34133

BONITA SPRINGS, FL 34135

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FEI Number Not Applicable ()

SMITH, BRADLEY R SMITH, BRADLEY R 27657 OLD 41 RD 27657 OLD 41 RD.

13515 BELL TOWER DRIVE, SUITE 101 BONITA SPRINGS, FL 34135 US BONITA SPRINGS, FL 34135 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: BRADLEY R. SMITH 04/30/2002 Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD (X) Change () Addition () Delete R. FLOYD LUCKEY, JR., R. FLOYD LUCKEY, JR., Name: Name: 5164 BONITA BEACH RD. Address: 5164 BONITA BEACH RD. Address:

City-St-Zip: BONITA SPRINGS, FL 33923 City-St-Zip: BONITA SPRINGS, FL 34134

(X) Change () Addition Title: () Delete Title: DOOLEY, CHARLES Name: DOOLEY, CHARLES Name:

Address: 4895 CITADEL LANE, #101 Address: 9845 CITADEL LANE, #101 City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135

Title: () Delete Title: () Change () Addition

JOHNSON, CLARA Name: Name: 9871 CITADEL LANE, #108 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip:

(X) Change () Addition Title: SD () Delete Title: SD Name: SAUNDERS, MARGERY Name: SAUNDERS, MARGERY

Address: 9871 CITADEL LANE, #@08 Address: 9871 CITADEL LANE, #208 BONITA SPRINGS, FL 34135 City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34135

Title: () Delete Title: () Change () Addition

THOMPSON, SHARON Name: Name: 320 N ADAMS AVE Address: Address: City-St-Zip: BUFFALO, NY 82834 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. FLOYD LUCKEY PTD 04/30/2002