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

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90259 032 ****61.25

DOCUMENT # N14971

1. Entity Name

NORTHSTAR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~C/O R & P PROPERTY MANAGEMENT~~ ~~285 AIRPORT RD. SO.~~ ~~NAPLES FL 34104~~	~~C/O R & P PROPERTY MANAGEMENT~~ ~~285 AIRPORT RD. SO.~~ ~~NAPLES FL 34104~~

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
c/o Sunburst Mgmt.	c/o Sunburst Mgmt.
Suite, Apt. #, etc. P.O. Box 110339	Suite, Apt. #, etc. P.O. Box 110339
City & State Naples, FL	City & State Naples, FL.
Zip 34108 Country US	Zip 34108 Country US

4. FEI Number 59-2771453 ☐ 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
~~R & P MANAGEMENT ASSOC~~ ~~285 AIRPORT RD SOUTH~~ ~~285 AIRPORT ROAD SO.~~ ~~NAPLES FL 34104~~	Name: Beverly Kueter Street Address (P.O. Box Number is Not Acceptable): c/o Sunburst Mgmt. Corp. 4306 Arnold Ave. City: Naples FL Zip Code: 34104

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: Beverly Kueter — Beverly Kueter — 4/20/03
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WESTLAND, YVONNE 3762 HALDEMAN CREEK DR NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCCARTHY, EDMUND 3760 HALDEMAN CREEK DRIVE NAPLES FL 34112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ ~~COCHRANE, CAROLYN~~ ~~3680 HALDEMAN DRIVE~~ ~~NAPLES FL 34112~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T, D BONADies, Bruce 3700 HALDEMAN DR. Naples, FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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		☐ Change ☐ Addition
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CR2E037 (10/02)

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: Edmund M. McCarthy — EDMUND McCARTHY — 4/20/03 — 239-263-7403