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

DOCUMENT # **N23785** FILED 1. Entity Name FRIENDS OF ROOKERY BAY, INC. 03 JUN 27 AM 11: 57 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 300 TOWER RD 300 TOWER RD NAPLES FL 34113 NAPLES FL 34113 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LUPO, ASHLEY D 950 N. COLLIER BLVD., SUITE 201 4977 Berkeley Drive MARCO ISLAND FL 34745 City Naples 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. **VPD** Change TITLE X Delete TITLE PD Addition NAME BACHLAND, BOB NAME Al Gal STREET ADDRESS 21707 SUNGATE COURT STREET ADDRESS 82 North Barfield Drive CITY-ST-7IP ESTERO FL 33928 CITY-ST-7IP Marco Island, FL 34145 VPD X Delete TITLE X Change Addition TITLE KLUSSMAN, BOB NAME NAME Kristen Smith STREET ADDRESS 22 FLOUNDER DRIVE STREET ADDRESS 568 109th Avenue North CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34112 Naples, FL 34108 TITLE M Delete TITLE Change ☐ Addition TD NAME RAHN, LISA NAME Ron Swaim STREET ADDRESS 1520 HONEY SUCKLE AVE STREET ADDRESS 4977 Berkeley Drive, Naples FL CITY-ST-ZIP CITY-ST-ZIP MARCO ISLAND FL 34145 (X) Change TITLE ☐ Delete TITLE ☐ Addition SD NAME LUPO, ASHLEY NAME Lance Shearer STREET ADDRESS 950 N. COLLIER BLVD. STREET ADDRESS 6265 28th Avenue SW, Naples, FL CITY-ST-ZE CITY-ST-ZIP MARCO ISLAND FL 34145 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LAYMAN, BRUCE NAME 12040 RIVERVIEW DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34135** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

16-25-2003 239-564-6583