

FILED
Apr 23, 2002 8:00 am
Secretary of State

03-28-2002 90037 033 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25036

1. Entity Name

NAPLES KEEP CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1040 6TH AVE. NORTH
NAPLES FL 33940

1040 6TH AVE. NORTH
NAPLES FL 33940

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0127564

Applied For

Not Applicable

Zip

Country

Zip

Country

34102

34102

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PORESMAN, W.F.
1040 8TH AVENUE, NORTH
NAPLES FL 33940

Name Vincent P. Valentini

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

1040 6th Ave. N.

City Naples, FL

FL

Zip Code

34102

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 Vincent P. Valentini - Manager

1-10-02

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 VPD
NAME ~~COMBARDI, RICHARD~~
STREET ADDRESS ~~152 CYPRESS WAY, EAST #3~~
CITY-ST-ZIP ~~NAPLES FL 34110~~ Delete

TITLE SD
NAME MINADEO, SUZANNE
STREET ADDRESS 144 CYPRESS WAY EAST #6
CITY-ST-ZIP NAPLES FL 34110 Delete

TITLE TD
NAME AYRES, SUZANNE
STREET ADDRESS 132 CYPRESS WAY, EAST #8
CITY-ST-ZIP NAPLES FL 34110 Delete

TITLE PD
NAME KING, TONI
STREET ADDRESS 152 CYPRESS WAY EAST #2
CITY-ST-ZIP NAPLES FL 34110 Delete

TITLE D
NAME SANCHEZ, JORGE
STREET ADDRESS 132 CYPRESS WAY EAST #2
CITY-ST-ZIP NAPLES FL 34110 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE PD
NAME MINADEO, SUZANNE
STREET ADDRESS 144 CYPRESS WAY E. #6
CITY-ST-ZIP Naples, FL 34110 Change Addition

TITLE SD
NAME AYRES, SUZANNE
STREET ADDRESS 132 CYPRESS WAY E. #8
CITY-ST-ZIP NAPLES, FL 34110 Change Addition

TITLE ED
NAME Choquette, Shelly
STREET ADDRESS 140 CYPRESS WAY E. #8
CITY-ST-ZIP Naples, FL 34110 Change Addition

TITLE VPD
NAME SANCHEZ, JORGE
STREET ADDRESS 132 CYPRESS WAY E. #2
CITY-ST-ZIP Naples, FL 34110 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 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 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:

SIGNATURE REQUIRED

3/14/02

Date

Daytime Phone #

CR2E037 (9/01)