07/10/2000 13:33 9417931140 MARILYN GREEN P

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 22, 2000 8:00 am
Secretary of State
08-22-2000 90220 042 ****61.25

DOCUMENT # N29648

1. Entity Name

THE CRESTVIEW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9856 LUNA CIRCLE NAPLES FL 34104 US	273 AIRPORT RD SO NAPLES FL 34104 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. #206
City & State	City & State NAPLES FL.
Zip / Country	Zip 34103 / Country COLLIER

4. FEI Number 65-0162317 ☐ 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
MARILYN GREEN PROPERTIES 273 AIRPORT RD SO NAPLES FL 34104	Name SOUTHWEST PROPERTY MGMT. Street Address (P.O. Box Number is Not Acceptable) 1044 CASTELLO DR. STE #206 NAPLES FL 34103 City FL Zip Code

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 [signature] 8-16-00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

$61.25
FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $235.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KENNEDY, JR W 9848 LUNA CIRCLE C101 NAPLES FL 34109	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GREVENSTUK, JANET 9856 LUNA CIR. A101 NAPLES FL 34109	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD THOMAS, CASSANDRA 9832 LUNA CIRCLE G103 NAPLES FL 34109	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHEILDS, SHIRLEY 9848 LUNA CIR C 204 NAPLES FL 34109	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MIRAGLIA, TONY 9848 LUNA CIR. C-201 NAPLES, FL. 34109	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HILL, JOHN 9844 LUNA CIRCLE D-201 NAPLES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATD BRENNER, RONALD 9844 LUNA CIRCLE, D202 NAPLES FL 34109	☐ 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

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] TONY MIRAGLIA 8/16/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #