## 2002 UNIFORM BUSINESS REPORT (UBR) FILED Apr 29, 2002 8:00 am Secretary of State **DOCUMENT # N29648** 1. Entity Name THE CRESTVIEW CONDOMINIUM ASSOCIATION, INC. 04-29-2002 90076 042 \*\*\*\*61 Principal Place of Business Mailing Address 9855 LUNA CIRCLE 1044 CASTELLO DR NAPLES FL 34104 NAPLES FL 34103 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0162317 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) ∴ ∀ PROPERTY MGMT 1044 CASTELLO DR STE 206 NAPLES FL 34103 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (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 Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 OFFICERS AND DIRECTORS 10. 11. (9/01)Addition TITLE TITLE Dolomor GREVENSTUK, JANET NAME NAME -103 CR2E037 STREET ADDRESS 9848 LUNA CIRCLE C101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34109 Addition Change PD ☐ Delete TITLE TITLE DOWNER, MARLENE NAME NAME STREET ADDRESS STREET ADDRESS 9856 LUNA CIRCLE #A-204 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34109 Addition Change TITLE TITLE MIRAGLIA, TONY NAME NAME STREET ADDRESS STREET ADDRESS 9848 LUNA CIR C 204 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34109 Change ☐ Addition TD TIT! F TITLE ☐ Defete SEARGENT, TRICE NAME NAME STREET ADDRESS 9828 LUNA CIRCLE #H-104 STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP NAPLES FL 34109 Change ☐ Addition TITLE BRENNER, RONALD NAME STREET ADDRESS 9844 LUNA CIRCLE, STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP NAPLES FL 34109 ☐ Addition atd TITLE Change BRENNER, RONALD NAME NAME STREET ADDRESS STREET ADDRESS 9844 LUNA CIRCLE D202 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34109 12. Thereby certify that the information supplied with this filling 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.

Daytime Phone #