

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29806

1. Entity Name

THE NEW ATTITUDES CLUB OF NAPLES, INCORPORATED

FILED
Mar 23, 2001 8:00 am
Secretary of State

03-23-2001 90027 029 ****61.25

0072884

Principal Place of Business

2740 BAYSHORE DR UNIT #14
NAPLES FL 34112

Mailing Address

2740 BAYSHORE DR UNIT #14
NAPLES FL 34112

00037321



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0089770**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CONNER, BEVERLY
3100 ARECA AVE APT #1
NAPLES FL 34112

7. Name and Address of New Registered Agent

Name **SISKIN, DANIEL**
Street Address (P.O. Box Number is Not Acceptable)
4321 Beechwood Lake Drive
City **Naples** FL Zip Code **34112**

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

Daniel M. Siskin

3/20/01

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

TITLE **D** ☐ Delete
NAME **COLWELL, PHILIP**
STREET ADDRESS **125 VERSAILLES CIR**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **D** ☐ Delete
NAME **MATLACK, RICHARD L.**
STREET ADDRESS **17 SONDERHEN CIR**
CITY-ST-ZIP **NAPLES FL 34114**

TITLE **D** ☐ Delete
NAME **OAKES, SHANE**
STREET ADDRESS **2647 PELTON AVE**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **T** ☒ Delete
NAME **GUEVIN, ROBERT**
STREET ADDRESS **284 BENSON ST**
CITY-ST-ZIP **NAPLES FL 34113**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DT** ☐ Change ☒ Addition
NAME **SISKIN, DANIEL**
STREET ADDRESS **4321 Beechwood Lake Dr.**
CITY-ST-ZIP **Naples, FL 34112**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

Daniel M. Siskin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/01

Date

941-417-4223

Daytime Phone #

CR2E037 (10/00)