2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **N30957** Jan 18, 2000 8:00 am **Secretary of State** KELLY GREENS TERRACE CONDOMINIUM VII ASSOCIATION 01-18-2000 90123 008 ****61.25 Mailing Address Principal Place of Business 96MARQUIS MANAGEMENT INC. **%MARQUIS MANAGEMENT INC.** 9400 GLADIOLUS DR. #100 9400 GLADIOLUS DR. #100 FORT MYERS FL 33908-6698 FORT MYERS FL 33908 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0141202 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FLEMING, MICHAEL **%MARQUIS MANAGEMENT INC.** 9400 GLADIOLUS DR, #100 Zip Code City FT. MYERS FL 33908 FL 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) Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Treas. Change Addition **PSD** TITLE ☐ Delete TITLE NAME BUSCH, PAUL A. SAME NAME Change STREET ADDRESS STREET ADDRESS 12170 KELLY SANDS WY 713 CITY-ST-7IP CITY-ST-ZIP FT. MYERS FL **X** Addition Delete ☐ Change TITLE TITLE Grant mc Nattle 12170 Kelly SAndoway 718 FRISINGER, JAMES E. NAME NAME STREET ADDRESS STREET ADDRESS 12170_KELLY_SANDS_WY_703. CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL Change ☐ Addition TITLE ☐ Delete TITLE **BELL. WILEY** NAME NAME STREET ADDRESS STREET ADDRESS 12170 KELLY SANDS WAY #721 CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33908 PSD Change ☐ Addition TITLE □ Delete WILLCOX, HERBERT NAME SAME NAME CHAnge NAME 12170 KELLY SANOS WAY #726 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL ☐ Change Addition TITLE ☐ Delete BARTLETT, CLAYTON NAME NAME STREET ADDRESS STREET ADDRESS 309-635 CANABERRY ST. CITY-ST-ZIP CITY-ST-ZIP WOODSTOCK, ONT CAN N454L3 Change Addition Delete TITLE TITLE 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.

Daytime Phone #