

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90207 013 ****61.25

DOCUMENT # N37031

1. Entity Name

ABBINGTON VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

265 AIRPORT RD SO
 NAPLES FL 34104
 US

C/O R.P. PROPERTY MANG
 265 AIRPORT RD SO
 NAPLES FL 34104
 US

2. Principal Place of Business

3. Mailing Address

4100 CORPORATE SQUARE
 Suite, Apt. #, etc.
105

4100 CORPORATE SQUARE
 Suite, Apt. #, etc.
105

City & State
NAPLES, FL

City & State
Naples, FL

Zip
34104 Country
USA

Zip
34104 Country
USA

4. FEI Number
65-0231839

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

PROFESSIONAL PROPERTY MGMT
235 PEBBLE BEACH CIRCLE
NAPLES FL 34113

Name
Anchor Associates, Inc
 Street Address (P.O. Box Number is Not Acceptable)
4100 CORPORATE SQUARE
105
 City
NAPLES FL Zip Code
34104

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 **Shirley Hingston, CEO, SHIRLEY Hingston** DATE **4-26-02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing ☐ **\$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
VP
CONNELL, KRISTIN ☒ Delete
240 PEBBLE BEACH CIRCLE
NAPLES FL 34113

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TOM DODSON ☒ Change ☐ Addition
240 PEBBLE BEACH CIRCLE
NAPLES, FL 34113

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DT
WESCHEY, BOB ☐ Delete
252 PEBBLE BCH CIR C204
NAPLES FL

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
SOTTILARE, ROBERT ☐ Delete
1808 FREDERICK AVE.
MERRICK NY

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
NUNN BERNARD, ☒ Delete
240 PEBBLE BEACH CIRCLE
NAPLES FL 34113

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
WALTER PRAWLUKI ☒ Change ☐ Addition
256 PEBBLE BEACH CIRCLE
NAPLES, FL 34113

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DS
SADLOWSKI, VINCENT ☒ Delete
179 GALE AVE.
MERIDEN CT

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
BILL O'CONNELL ☒ Change ☐ Addition
244 PEBBLE BEACH CIRCLE
NAPLES, FL 34113

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)