

2001 UNIFORM BUSINESS REPORT (UBR)

5/2

FILED
Jun 27, 2002 8:00 am
Secretary of State

05-27-2002 90501 002 ****61.25

DOCUMENT #

1. Entity Name

Fairway Villas H.O.A. of Naples, Inc.

Principal Place of Business

Mailing Address

R.P. Property Management 265 Airport Rd S
 265 Airport Rd S.
 Naples FL 34104

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0237772

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

R.P. Property Management
 265 Airport Rd South
 Naples, FL 34104

Name R.P. Property Mgmt.

Street Address (P.O. Box Number is Not Acceptable)
 265 Airport Road South

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-30-02

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

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY

TITLE
 NAME
 STREET
 CITY

TITLE
 NAME
 STREET
 CITY

TITLE
 NAME
 STREET
 CITY

TITLE
 NAME
 STREET
 CITY

TITLE
 NAME
 STREET
 CITY

Sorry we didn't
 realize - thanks
 + please let us
 know if there is
 anything else you
 need -
 Indi Corey 239-643-3353
 Bookkeeper ext.
 Fairway Villas 218

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

President
 Worrada, Harold
 486 St. Andrews Blvd
 Naples, FL 34113

Director

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Vice-President
 marenchin, Ellen
 531 St. Andrews Blvd
 Naples, FL 34113

Director

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Secretary
 Worrada, Gisela
 486 St. Andrews Blvd
 Naples, FL 34113

Director

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Director
 Pucci, Joseph
 108 Tanglewood Ct.
 Naples FL 34113

Director

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Treasurer
 Malloy, Theresa
 493 St. Andrews Blvd
 Naples, FL 34113

Director

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)