2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State
04-16-2003 90122 026 ****61.25

00512383

DOCUMENT # N94000003890

1. Entity Name

GARNET CLUB AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 9709 NAPLES FL 34101 US	P.O. BOX 9709 NAPLES FL 34101 US

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Resort Mgmnt 2685 Horseshoe Dr. S	Resort Management 2685 Horseshoe Dr. S. #215
Suite, Apt. #, etc. #215	Suite, Apt. #, etc. Ste #215
City & State Naples, FL	City & State Naples, FL
Zip 34104 Country US	Zip 34104 Country US

4. FEI Number 65-0581150 ✓ ☐ 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
HART, STEPHEN P COLLIER FINANCIAL, INC. 4985 EAST TAMIANI TRAIL NAPLES FL 34413	Name: Irwin LeShaw Street Address (P.O. Box Number is Not Acceptable) 218 Gabriel Cir. #5 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Irwin LeShaw 4.9.03

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHELLY, GEORGE 218 GABRIEL CIRCLE #11 NAPLES FL 34104	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Shelley, George 218-11 Gabriel Cir. #11 Naples, FL 34104	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LESHAW, IRWIN 218 GABRIEL CIRCLE #5 NAPLES FL 34104	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD WEITECHA, HENRY 186 GABRIEL CIRCLE #2 NAPLES FL 34104	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Weitecha, Henry 186-02 Gabriel Cir #2 Naples, FL 34104	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HUESTER, MARIE 100 ELMHURST BLVD SCRANTON PA 18505	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Huester, Marie 218-06 Gabriel Cir #6 Naples, FL 34104	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD YOKIE, MARY-ELLEN 5631 SPRINGWATER LANE WEST BLOOMFIELD MI 48322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: Irwin LeShaw SIGNATURE REQUIRED 4.9.03 239-352-8887