

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000002237

1. Entity Name

THE SERENITY CLUB OF NAPLES, INC.

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90047 012 ****61.25

Principal Place of Business

1725 CR 951, SUITE 107
 NAPLES FL 34116

Mailing Address

1725 CR 951, SUITE 107
 NAPLES FL 34116-6041

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

65-0669435

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

EDDLEMAN, JERRY D
 1725 CR 951, SUITE 107
 NAPLES FL 34116

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME COLLINS, RICK
 STREET ADDRESS 828 11TH ST SW
 CITY-ST-ZIP MAPLES FL 34117

TITLE VPD ☒ Delete
 NAME COSTELLO, RUIN
 STREET ADDRESS 1725 CR 951 STE 107
 CITY-ST-ZIP MAPLES FL 34116

TITLE TD ☒ Delete
 NAME PRATTE, CYNTHIA
 STREET ADDRESS P.O. BOX 990001
 CITY-ST-ZIP MAPLES FL 34116

TITLE SD ☐ Delete
 NAME TUFF, RUSSELL
 STREET ADDRESS 1705 CR 951 STE 107
 CITY-ST-ZIP MAPLES FL 34116

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☒ Change ☒ Addition
 NAME **JOYCE GARZA**
 STREET ADDRESS **9845 CITADEL LANE #202**
 CITY-ST-ZIP **BONITA SPRINGS, FL 34135**

TITLE ☐ Change ☒ Addition
 NAME **TD DAVID DALTON**
 STREET ADDRESS **5680 18th Avenue NW**
 CITY-ST-ZIP **Naples, FL 34119**

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

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 or without other life empowered.

SIGNATURE: **RICK COLLINS** PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/00 941-352-9782

Date

Daytime Phone #

CR2E037 (9/99)