2000 UNIFORM BUSINESS REPORT (UBR)

4/24/0

FILED
May 18, 2000 8:00 am
Secretary of State
04-24-2000 90114 010 ****61.25

DOCUMENT # N97000003368

Entity Name

AUGUSTA AT PELICAN MARSH HOMEOWNERS ASSOCIATION.

Principal Place of Business	Mailing Address
[illegible] TAMIAMI TR. N STE 300 [illegible] FL 34103	3838 TAMIAMI TR. N STE 300 NAPLES FL 34103-3586

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6580 SABLE RIDGE LANE Suite, Apt. #, etc.	6580 SABLE RIDGE LANE Suite, Apt. #, etc.
City & State: NAPLES, FL	City & State: NAPLES, FL
Zip: 34109 Country: USA	Zip: 34109 Country: USA

4. FEI Number: 59-3451542 ☐ 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
GOODMAN, KENNETH D 3838 TAMIAMI TR., N STE 300 NAPLES FL 34103 Delete	Name: RAPPS, WILLIAM Street Address (P.O. Box Number is Not Acceptable): 6580 SABLE RIDGE LANE City: NAPLES FL Zip Code: 34109

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 _____ 4-14-00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST GOODMAN, KENNETH D 3838 TAMIAMI TR., N STE 300 NAPLES FL 34103	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST RAPPS WILLIAM 6580 SABLE RIDGE LANE NAPLES, FL., 34109	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, E.A. 356 CROMWELL CT NAPLES FL 34108	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KNOPKE, DAVID 6585 Nicholas Blvd. PH-4 NAPLES, FL., 34108	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WAINE, PAUL B 280 S COLLIER BLVD., #802 MARCO ISLAND FL 34145	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARONE, BERNARD J 3011 70th ST. SW. NAPLES, FL 34105	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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 Bernard J Barone 3-17-00 941-649-5455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

William D. Rapps WILLIAM RAPPS 941-262-4333 x159