2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **N98000000045** May 02, 2000 8:00 am Secretary of State COLLIER COUNTY MICROENTERPRISE CORPORATION 05-02-2000 90107 001 ****61.25 Principal Place of Business Mailing Address C/OQUARLES & BRADY LIP C/OQUARLES & BRADY LIP 4501 TAMIAMI TR N. #300 4501 TAMIAMI TR N. #300 NAPLES FL 34103-3060 NAPLES FL 34103-3023 2. Principal Place of Business Mailing Address c/o Quarles & Brady LLP c/o Quarles & Brady LLP Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 65-083 1503 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 34103-3060 US Fee Required 6. Name and Address of Current Registered Agent - 7. Name and Address of New Registered Agent Naples Lawdock, Inc. Street Address (P.O. Box Number is Not Acceptable) LAWDOCK, INC. C/OQUARLES & BRADY LLP 4501 TAMIAMI TRAIL N. #300 Zip Code NAPLES FL 34103 FL 8. The above named entity submits th e purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE acking a committed applicable resident. Registered Agent signaline required when reinstering) FILE NOW 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Delete TITLE Kerry-Treasurer Change TITLE NAME NAME CALA, TERRY STREET ADDRESS STREET ADDRESS NBD BANK, 4901 TAMIAMI TRAIL NORTH CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 Williams -Bd. Member Change Delete TITI F TITLE n BRIGHAM, WILLIAM NAME NAME 5150 Tamiami Trail N. Suite 403 STREET ADDRESS STREET ADDRESS PELICAN NAT. BANK, 811 ANCHOR RODE DR. Nooles FL 34163 CITY-ST-ZIP CITY-ST-ZIE NAPLES FL 34103 D Nancy Merolla -Bd. Mentoge ★ Addition D ☐ Delete TITLE TITLE LIMB, NANCY A NAME 800 Cofporate Blvd. N. W. STREET ADDRESS STREET ADDRESS 800 LAUREL OAK DRIVE - #300 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34108 Anna Liu-Bd. Member Change ☐ Delete TITLE HINKLE, SAMUEL F JR. NAME 606 5th Ave, S., #201 STREET ADDRESS STREET ADDRESS U.S. TRUST, 765 SEAGATE DRIVE CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 rank Rodriquez - Rd. Member Delete FIELD, PENNY A STREET ADDRESS STREET ADDRESS P.O. BOX 8208 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34101-8208 TITLE DS ☐ Delete TITLE Addition NAME NAME CASELTINE, HELENE STREET ADDRESS STREET ADDRESS 3050 N. HORESEHOE DR. #153 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104

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.