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

FILED
Apr 17, 2003 8:00 am
Secretary of State
04-17-2003 90206 044 ****61.25

DOCUMENT # N98000003496

1. Entity Name
SUNSET CAY VILLAS V CONDOMINIUM ASSOCIATION, INC

Principal Place of Business	Mailing Address
GULF COAST MANAGEMENT SERVICES. INC. 10060 AMBERWOOD ROAD. SUITE 4 FT MYERS FL 33913	GULF COAST MANAGEMENT SERVICES. INC. 10060 AMBERWOOD ROAD. SUITE 4 FT MYERS FL 33913

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
834 Bald Eagle Dr	834 Bald Eagle Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Marco Island, FL	City & State: Marco Island, FL
Zip: 34145 Country: USA	Zip: 34145 Country: USA

4. FEI Number 65-0996809 ☐ 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
RESORT MANAGEMENT 834 BALD EAGLE DR MARCO ISLAND FL 34145	Name: Jamie Gruesel Street Address (P.O. Box Number is Not Acceptable) 1104 N. Collier Blvd City: Marco Island FL Zip Code: 34145

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: Jamie B Gruesel Jamie B Gruesel 4/14/03
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 COX, TODD 170 NEWPORT DRIVE, #7 NAPLES FL 34114	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HORNING, JERRY 170 NEWPORT DRIVE, #6 NAPLES FL 34114	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NARKIEWICZ, MARILYN 170 NEWPORT DRIVE, #6 NAPLES FL 34114	☐ 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
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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: Jamie B Gruesel REQUIRED 3-6-03