

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001478

1. Entity Name

THE BOLERO I AT TIBURON CONDOMINIUM ASSOCIATION,

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90107 006 ****62.25

Principal Place of Business

Mailing Address

24301 WALDEN CENTER DR., SUITE 300
NAPLES FL 34134

24301 WALDEN CENTER DR., SUITE 300
NAPLES FL 34134-4920

2. Principal Place of Business

24301 Walden Center Drive

3. Mailing Address

24301 Walden Center Drive

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

City & State

Bonita Springs, FL

City & State

Bonita Springs, FL

4. FEI Number

59-3564003

Applied For

Not Applicable

Zip
34134

Country

USA

Zip

34134

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HASTINGS, VIVIAN N
24301 WALDEN CENTER DR., SUITE 300
NAPLES FL 34134

Name

Vivien N. Hastings

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

24301 Walden Center Drive

Suite 300

City

Bonita Springs

FL

Zip Code

34134

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

Vivien N. Hastings

Vivien N. Hastings

4/11/00

Signature, typed or printed name of registered agent and title, 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
NAME BAILEY, DENNIS
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP NAPLES FL 34134 ☒ Delete

TITLE DP
NAME Timothy Oak
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134 ☐ Change ☒ Addition

TITLE VD
NAME GREENBERG, MICHAEL
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP NAPLES FL 34134 ☐ Delete

TITLE DVS
NAME Kenneth W. Hayden
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134 ☐ Change ☒ Addition

TITLE VSD
NAME FLINN, MILTON G
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP NAPLES FL 34134 ☒ Delete

TITLE DT
NAME Dustin Travis
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL, 34134 ☐ Change ☒ Addition

TITLE T
NAME GUIDO, PHILIP
STREET ADDRESS 24301 WALDEN CENTER DR., SUITE 300
CITY-ST-ZIP NAPLES FL 34134 ☒ Delete

TITLE D
NAME Kelli Eastman
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL. 34134 ☐ 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

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

3-2000

KENNETH W. HAYDEN

941-

498-8220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)