

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000006668

FILED
Apr 29, 2003
Secretary of State

Entity Name: CLUBSIDE II AT PELICAN STRAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES,, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Mailing Address:

FEI Number: 65-0969536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, GLENN
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STONEY, JUDY
Address: 5897 THREE IRON DRIVE, #1803
City-St-Zip: NAPLES, FL 34110

Title: DVP () Delete
Name: MCBRIDE, DON
Address: 5896 THREE IRON DRIVE, #1703
City-St-Zip: NAPLES, FL 34110

Title: DS () Delete
Name: ZULAUF, DENISE
Address: 5908 THREE IRON DRIVE, #2201
City-St-Zip: NAPLES, FL 34110

Title: DT () Delete
Name: SHEPPARD, JACK
Address: 5908 THREE IRON DRIVE, #2202
City-St-Zip: NAPLES, FL 34110

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: SCHMIDT, RICHARD
Address: 5912 THREE IRON DRIVE #2401
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY STONEY

DP

04/29/2003

Electronic Signature of Signing Officer or Director

Date