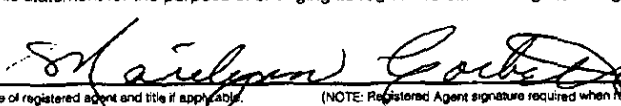
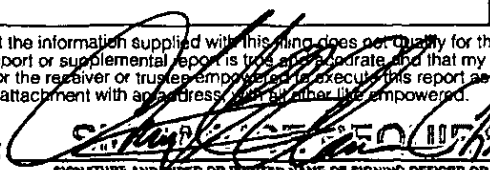


2000 UNIFORM BUSINESS REPORT (UBR)

5/4

FILED
Jun 16, 2000 8:00 am
Secretary of State

05-04-2000 90225 004 ****61.25

DOCUMENT # N99000006744			
1. Entity Name LAKEVIEW VII AT CARLTON LAKES CONDOMINIUM ASSOCI			
Principal Place of Business 2405 PIPER BLVD. NAPLES FL 34110		Mailing Address 2405 PIPER BLVD. NAPLES FL 34110-1387	
2. Principal Place of Business Suite, Apt. #, etc.		Property Management Professionals of SW Florida 100 Vineyards Blvd. Naples, FL 34109	
City & State		FEI Number 65-0902432 Applied For ☐ Not Applicable	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent SWALM, MURRELL & SAMOUCÉ, P.A. 2375 TAMiami TRAIL N. SUITE 308 NAPLES FL 33940		7. Name and Address of New Registered Agent Property Management Professionals of SW Florida 100 Vineyards Blvd. Naples, FL 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 		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	D CLAUSSEN, CHRISTOPHER G 2405 PIPER BLVD. NAPLES FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAUSSEN, ROBERT G 2405 PIPER BLVD. NAPLES FL 34110 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STERLING, JACK 2405 PIPER BLVD. NAPLES FL 34110 ☐ 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
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 or without other like empowered.			
SIGNATURE: 		Date 4-28-00 Daytime Phone 941-596-9067	



DO NOT WRITE IN THIS SPACE

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