·2002 (NILOKW ROZI	NESS REPU	KT	(ARI	K)						{
DOCUMENT # P0000087160 1. Entity Name						FILED					
SARATOGA AT LELY RESORT, INC.						02 JUN -5 AM 9:55					
Principal Place of 4771 ALBERTON (Mailing Address 4771 ALBERTON COURT				SECRETARY OF STATE TALLAHASSĘE, FLORIDA					
#3502 NAPLES FL 34105		#3502 NAPLES FL 34105									
Principal Place of Business 4770 Alberton Court Suite. Apt. #. etc.		3. Mailing Address 4770 Alberton Court Suite, Apt. #, etc.									
#2602 City & State		#2602 City & State				DO NOT WRITE IN THIS SPACE					
Naples,	1	Naples, FL			4.	FEI Number	65-104023	37	N	pplied For lot Applicable	- e
Zip 34105	Country USA Name and Address of Current R	Zip 34105	USA	ıry			Status Desired	Do minto mo d	\$8.75 Ad Fee Require		
	. Name and Address of Current A	egistered Agent		Momo	· · · · ·	Name and A	ddress of New	Registerea	Agent		-
BATEMAN, ARTHUR L 4771 ALBERTON COURT, #3502 NAPLES FL 34105				Street A	ddress (P.O.		I is Not Acceptat Court, #2				- -
		City			aples			FL	Zip Coo	de L05	-
8. The above named entity sybmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Tile NOW!!! After May 1, 2002 Make Check Payable			? Fee v	will be \$5	50.00	1	ion Campaign F Fund Contribut	-	\$5.0 Adde	00 May Be d to Fees	
11.	OFFICERS AND D	IRECTORS	12.		Αſ	DDITIONS/CI	HANGES TO OF	FICERS AND	DIRECTOR	RS IN 11	7
STREET ADDRESS 47	TEMAN, ARTHUR L 71 ALBERTON COURT, #3502 PLES FL 34105	☐ Delete			4770 A	n, Arth Albertor	Court,	#2602	` ⊠ *Change	Addition	E034 (9/
STREET ADDRESS 444	RSCH, JOYCE E 45 DOVER COURT, #803 PLES FL 34105	☐ Delete			1140		10005 -06/1:	182 4 3/020	Change 5 1 1 -	□ Addition 8 019	CR2
STREET ADDRESS 678	ILLS, JOYCE T 80 SABLE RIDGE LANE PLES FL 34109	☐ Delete		1			To Take See	(50.00-	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete							☐ Change	☐ Addition	
13. 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 true me 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 true me indicated on this report of the corporation or the receiver or true me 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 true me appears in Block 11 or Block 12 if changed, or on an attachment with an arbitrary in 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 of the corporation											
							- Land		rajorno Friblie #		1