

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90009 042 ***150.00

DOCUMENT # P01000104041

1. Entity Name
DOWN ISLAND POOLS, INC.

Principal Place of Business
**136 OLD TAMiami TRAIL
 NAPLES FL 34110**

Mailing Address
**136 OLD TAMiami TRAIL
 NAPLES FL 34110**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
P.O. Box 111293
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Naples, FL

City & State

4. FEI Number
65-1151643

Applied For
☐ Not Applicable

Zip
34108

Country
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

**GREENFELD, ROBERT,
 136 OLD TAMiami TRAIL
 NAPLES FL 34110**

7. Name and Address of New Registered Agent

Name
GREENFELD, ROBERT

Street Address (P.O. Box Number is Not Acceptable)
703A 110TH AVE N

City
NAPLES **FL** Zip Code **34108**

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 _____
 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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PS** ☐ Delete
 NAME **GREENFELD, ROBERT**
 STREET ADDRESS **136 OLD TAMiami TRAIL**
 CITY-ST-ZIP **NAPLES FL 34110**

TITLE **VT** ☐ Delete
 NAME **RANS, VICTORIA**
 STREET ADDRESS **136 OLD TAMiami TRAIL**
 CITY-ST-ZIP **NAPLES FL 34110**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** ☒ Change ☐ Addition
 NAME **GREENFELD, ROBERT**
 STREET ADDRESS **703A 110TH AVE N**
 CITY-ST-ZIP **NAPLES, FL 34108**

TITLE **VT** ☒ Change ☐ Addition
 NAME **RANS, VICTORIA**
 STREET ADDRESS **703A 110TH AVE N**
 CITY-ST-ZIP **NAPLES, FL 34108**

TITLE ☐ Change ☐ Addition
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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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

941 464 1552

SIGNATURE: W. RANS **RECEIVED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 10, 2002

Date

Daytime Phone #

CR2E034 (9/01)