## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 08:00 AM DOCUMENT # P9400035363 Entity Name **Secretary of State** BARRON COLLIER COMMERCIAL, INC. Principal Place of Business Mailing Address 2600 GOLDEN GATE PKWY P.O. BOX 413038 NAPLES FL NAPLES FL34105 34101 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0489797 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARINELLI PAUL J. MARINELLI 2600 GOLDEN GATE PARKWAY Street Address (P.O. Box Number is Not Acceptable) 2600 GOLDEN GATE PARKWAY STE, 200 NAPLES FL34105 US City Zip Code NAPLES 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 04/30/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (11/00) ☐ Delete TITLE X Change ☐ Addition MAME SPROIT. лилет NAME SPROUL JULET STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200 STREET ADDRESS 2600 GOLDEN GATE PKWY CITY-ST-ZIP NAPLES FL 34105 CITY-ST-ZIP NAPLES CD ☐ Delete TITLE CD X Change NAME GABLE LAMAR NAME GABLE LAMAR STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200 STREET ADDRESS 2600 GOLDEN GATE PKWY CITY-ST-ZIP NAPLES FL 34105 CITY-ST-ZIP NAPLES FL34105 Delete TITLE X Change ☐ Addition COLLIER III BARRON COLLIER III NAME BARRON STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200 STREET ADDRESS 2600 GOLDEN GATE PKWY CITY-ST-ZIP NAPLES 34105 FLCITY-ST-ZIP NAPLES FL. 34105 TITLE ☐ Delete TITLE ST Change ☐ Addition BOAZ BRADLEY A. NAME BOAZ. BRADLEY A. 2600 GOLDEN GATE PARKWAY, STE. 200 STREET ADDRESS STREET ADDRESS 2600 GOLDEN GATE PKWY CITY-ST-ZIP NAPLES CITY-ST-ZIP NAPLES 34105 FL. TITLE ☐ Delete TOTALE X Change ☐ Addition TRIPLETT KAREN NAME TRIPLETT KAREN STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200 STREET ADDRESS 2600 GOLDEN GATE PKWY CITY-ST-ZIP NAPLES 34105 CITY-ST-ZIP NAPLES FL34105 ☐ Delete TITLE Change ☐ Addition MARINELLI PAUL J NAME MARINELLI STREET ADDRESS 2600 GOLDEN GATE PKWY STE 200 STREET ADDRESS 2600 GOLDEN GATE PKWY CITY-ST-ZIP NAPLES 34105 CITY-ST-ZIP NAPLES 34105 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.

04/30/2001

Date

Daytime Phone #

PAUL J. MARINELLI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_