

P95000054336

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

900001533448
-07/10/95--01042--017
****122.50 ****122.50

SUBJECT: Cross Bay, Inc.

Enclosed please find an original and one (1) copy of the articles of incorporation and a check in the amount of \$122.50.

FROM: Stephen T. Popper
5051 Castello Drive, Suite 200
Naples, FL 33940
(941) 263-3666

FILED
95 JUL 10 AM 7:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. REINSTER JUL 14 1995

FILED

95 JUL 10 AM 7:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I - NAME

The name of the corporation shall be:

Cross Bay, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5051 Castello Drive, Suite 200
Naples, FL 33940

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares

which will be valued at \$1.00 par.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

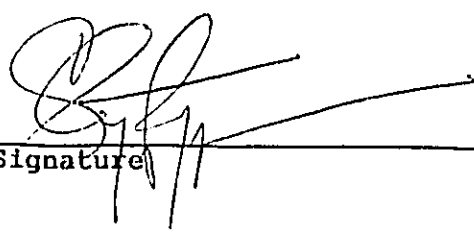
Amy H. Taylor, CPA
5051 Castello Drive, Suite 201
Naples, FL 33940

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Stephen T. Popper
5051 Castello Drive, Suite 201
Naples, FL 33940

The undersigned incorporator has executed these Articles of Incorporation this 7 day of July, 1995.



Signature

FILED

95 JUL 10 AM 7:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Cross Bay, Inc.
2. The name and address of the registered agent and office is:

Amy H. Taylor, CPA
5051 Castello Drive, Suite 201
Naples, FL 33940

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Amy H. Taylor, CPA

7/7/95

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
Remotement
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P9500054336 (9)**
1. Corporation Name
CROSS BAY, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV -4 PM 4:15



Principal Place of Business

5051 CASTELLO DRIVE
SUITE 200
NAPLES FL 33940

Mailing Address

5051 CASTELLO DRIVE
SUITE 200
NAPLES FL 33940

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

g. Name and Address of Current Registered Agent

AMY H TAYLOR, CPA
5051 CASTELLO DRIVE
SUITE 201
NAPLES FL 33940

3. Date Incorporated or Qualified
07/10/1995

3a. Date of Last Report

4. FEI Number

65-0593572

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

AMY H TAYLOR, CPA

10/30/96

Signature of officer or director of corporation or registered agent of the corporation

(NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME *Stephen T. Pinner*
STREET ADDRESS *5051 Castello Dr. St. 200*
CITY - ST - ZIP *Naples FL 33940*

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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

900001999599--3
-11/07/96--01101--020

****175.00 ****175.00

900001999599--3
-11/07/96--01101--021

****200.00 ****200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Stephen T. Pinner

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

420/36

941-263-3666

Date Daytime Phone

CR2E034 (12/95)