

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000104081

1. Entity Name

THE NAPLES SCHOOL OF REAL ESTATE, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90090 033 ***150.00

Principal Place of Business

5100 NORTH TAMiami TRAIL
SUITE 201
NAPLES FL 34103
US

Mailing Address

5100 NORTH TAMiami TRAIL
SUITE 201
NAPLES FL 34103-2810
US

2. Principal Place of Business

4910 Tamiami Tr. N.

Suite, Apt. #, etc.

Suite 210

City & State

Naples FL

Zip

34103

Country

U.S.

3. Mailing Address

4910 Tamiami Tr. N.

Suite, Apt. #, etc.

Suite 210

City & State

Naples, FL

Zip

34103

Country

U.S.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3438462

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SZEMPRUCH, DAVID J
5100 N TAMiami TR
SUITE 201
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name

Same

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

4910 Tamiami Tr. N., Suite 210

City

Naples

FL

Zip Code

34103

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, 2000 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 VPD
NAME COLER, THOMAS E
STREET ADDRESS 5100 N TAMiami TRAIL SUITE 201
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE PD
NAME SZEMPRUCH, DAVID J.
STREET ADDRESS 5100 NORTH TAMiami TRAIL SUITE 201
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE STD
NAME VASIOFF, ANITA D.
STREET ADDRESS 1440 MARAVILLA AVE
CITY-ST-ZIP FORT MYERS FL 33901 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 4910 Tamiami Tr. N., Suite 210
CITY-ST-ZIP Naples, FL 34103 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 4910 Tamiami Tr. N., Suite 210
CITY-ST-ZIP Naples, FL 34103 ☒ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 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 or other like empowered.

SIGNATURE:

David J. Szempruch

Date

Daytime Phone #

3/22/00 941-261-8484