

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000108477

1. Entity Name
LAS PALMAS COLONY VILLAS, INC.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90091 028 ***150.00

8



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2154 TRADE CENTER WAY SUITE 3 NAPLES FL 34109		Mailing Address 2154 TRADE CENTER WAY SUITE 3 NAPLES FL 34109	
2. Principal Place of Business c/o Landmark Development Group Suite, Apt. #, etc. 5668 Strand Court, #108		3. Mailing Address c/o Landmark Development Group Suite, Apt. #, etc. 5668 Strand Court, #108	
City & State Naples, FL		City & State Naples, FL	
Zip 34110	Country US	Zip 34110	Country US

4. FEI Number 59-3484358	Applied For <input type="checkbox"/>
Not Applicable	

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CLASP, INC.
C/O CUMMINGS & LOCKWOOD
3001 TAMiami TR N. 4 FLR
NAPLES FL 34103

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City FL Zip Code	

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) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<p>DPST SHAFRAN, ARTHUR A 5100 TAMiami TRAIL NORTH SUITE 123 NAPLES FL 34103</p> <input type="checkbox"/> Delete		<p>D, P, S Arthur A. Shafran 5668 Strand Court, #108 Naples, FL 34110</p> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<p>James E. Pierce 5668 Strand Court, #108 Naples, FL 34110</p> <input type="checkbox"/> Delete		<p>D, V James E. Pierce 5668 Strand Court, #108 Naples, FL 34110</p> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<p>David Crowley 5668 Strand Court, #108 Naples, FL 34110</p> <input type="checkbox"/> Delete		<p>V, T, Assistant Secretary David Crowley 5668 Strand Court, #108 Naples, FL 34110</p> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<p>Arthur A. Shafran, President 941-597-8400</p> <input type="checkbox"/> Delete		<p>Arthur A. Shafran, President 941-597-8400</p> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
<p>Arthur A. Shafran, President 941-597-8400</p> <input type="checkbox"/> Delete		<p>Arthur A. Shafran, President 941-597-8400</p> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
<p>Arthur A. Shafran, President 941-597-8400</p> <input type="checkbox"/> Delete		<p>Arthur A. Shafran, President 941-597-8400</p> <input type="checkbox"/> Change <input type="checkbox"/> 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur A. Shafran, President

941-597-8400

Date

Daytime Phone #

CR2E034 (10/00)