

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 12, 2001 8:00 am**  
**Secretary of State**

05-12-2001 90009 017 \*\*\*158.75

**DOCUMENT # P98000023562**

1. Entity Name  
**GULF BAY ADVERTISING AGENCY, INC.**

Principal Place of Business 3470 CLUB CENTER BLVD. NAPLES FL 34114	Mailing Address 3470 CLUB CENTER BLVD. NAPLES FL 34114
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00004434



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3200 Tamiami Trail N.	3. Mailing Address 3200 Tamiami Trail N.
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Suite, Apt. #, etc. Suite 200	Suite, Apt. #, etc. Suite 200
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City & State Naples, FL	City & State Naples, FL
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4. FEI Number 59-3508854	Applied For Not Applicable
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Zip 34103	Country	Zip 34103	Country
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5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

WOODWARD, MARK J  
 801 LAUREL OAK DR., SUITE 710  
 NAPLES FL 34018

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 3200 Tamiami Trail N., Suite 200  
 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D DINARDO, ANTHONY 3470 CLUB CENTER BLVD NAPLES FL 34114	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D PARISI, JOSEPH L 3470 CLUB CENTER BLVD NAPLES FL 34103	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D WOODARD, MARK J 801 LAUREL OAK DR., SUITE 710 NAPLES FL 34108	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	3200 Tamiami Trail N., Ste. 200 Naples, FL 34103
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<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: Anthony D. Nardo  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01 941 732 9400  
Date Daytime Phone #

CR2E034 (10/00)