## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other J

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE:

## Apr 19, 2000 8:00 am Secretary of State DOCUMENT # P99000051508 1. Entity Name MARCO DOLPHIN PROPERTIES, INC. 04-19-2000 90072 018 \*\*\*150.00 Principal Place of Business Mailing Address 1042 MAINSAIL UNIT 811 1042 MAINSAIL: UNIT-011 MAPLES FL 34114-7821 NAPLES FL 34114 2. Principal Place of Business 3. Mailing Address 1021 Angles 1021 Angles Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State MARCO FEI Number 3581145 Applied For City & State ストリアと 34145 MARCO Not Applicable Country \$8.75 Additional 34142 5. Certificate of Status Desired Collite 34148 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name E. GLENN TUCKER WOODWARD, CRAIG R Street Address (P.O. Box Number is Not Acceptable) Suite 204, SunTrust Centre WOODWARD, PIRES & LOMBARDO, P.A. 606 BALD EAGLE DR., STE, 500 950 North Collier Blvd. MARCO ISLAND FL 34146 City Marco Island Zip Code 34145 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Delete TITLE COLLARDEY, DAN C NAME STREET ADDRESS 1042 MAINSAIL, UNIT 811 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34114 ☐ Change ☐ Delete Addition TITLE NORKO-COLLARDEY, MAXINE E NAME 1042 MAINSAIL, UNIT-811 ... STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34114 ☐ Change Addition TITLE ☐ Delete TITLE NAME SCHAWB, CARL W NAME STREET ADDRESS STREET ADDRESS 1231 BUTTERFLY CT. CITY-ST-ZIP CITY-ST-ZIF MARCO ISLAND FL 34145 ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

empowered.

COLLARDEY 4-5.00 941-640578