

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90166 014 \*\*\*150.00

DOCUMENT # P99000084368  
1. Entity Name  
NAPLES BIG CYPRESS, INC.

**DO NOT WRITE IN THIS SPACE**

656487

2. Principal Place of Business 720 GOODLETTE ROAD Suite, Apt. #, etc. SUITE 305 City & State NAPLES, FL Zip 34102		3. Mailing Address 720 GOODLETTE ROAD Suite, Apt. #, etc. SUITE 305 City & State NAPLES, FL Zip 34102	
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DO NOT WRITE IN THIS SPACE

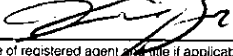
4. FEI Number 59-3603721	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

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

Name BASIK, KEITH A.
Street Address (P.O. Box Number is Not Acceptable) 720 GOODLETTE ROAD, SUITE 305
City NAPLES
State FL
Zip Code 34102

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  KEITH A. BASIK DATE 4/24/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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 P	NAME BASIK, KEITH	STREET ADDRESS 1100 ROYAL PALM DRIVE	CITY-ST-ZIP NAPLES, FL 34103
TITLE VS	NAME BASIK, JEFFREY	STREET ADDRESS 7870 EAGLES FLIGHT LANE	CITY-ST-ZIP FORT MYERS, FL 33912
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  KEITH A. BASIK DATE 4/24/02 239-262-4622

CR2E034B (12/01)