

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V08064

FILED
Apr 21, 2002 8:00 AM
Secretary of State

Entity Name: RESIDENCES BY ROBERTA, INC.

Current Principal Place of Business:

C/O BOND, SCHOENECK & KING
4001 TAMIAMI TRAIL NORTH STE 404
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

C/O BOND, SCHOENECK & KING
4001 TAMIAMI TRAIL NORTH STE 404
NAPLES, FL 34103

New Mailing Address:

FEI Number: 65-0312927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRONIN, DENNIS P ESQ.
C/O BOND, SCHOENECK & KING
1167 THIRD STREET SOUTH
NAPLES, FL 33940 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEINBERG, ROBERTA
Address: 54 MISTY CRES
City-St-Zip: NORTH YORK ONT, CA M2L 1

Title: ST () Delete
Name: TICK, LORNE
Address: 54 MISTY CRES
City-St-Zip: NORTH YORK ONT, CA M2L 1

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STEINBERG, ROBERTA
Address: 54 MISTY CRES
City-St-Zip: NORTH YORK ONT, CA M3B 1T3

Title: ST (X) Change () Addition
Name: TICK, LORNE
Address: 54 MISTY CRES
City-St-Zip: NORTH YORK ONT, CA M3B 1T3

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORNE TICK

ST

04/21/2002

_____ Electronic Signature of Signing Officer or Director

_____ Date