

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 Mailing Address
3470 CLUB CENTER BLVD. **3470 CLUB CENTER BLVD.**
NAPLES FL 34114 **NAPLES FL 34114**

00004434



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
3200 Tamiami Trail N. **3200 Tamiami Trail N.**

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 200 **Suite 200**

City & State City & State
Naples, FL **Naples, FL**

4. FEI Number **59-3508854** Applied For
 Not Applicable

Zip Country Zip Country
34103 **34103**

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 _____ (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)

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)