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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 720786

1. Corporation Name

CHARLOTTE SHORES PROPERTY OWNERS ASSOCIATION, IN
C.

Principal Place of Business

5234 GENESEE PKWY
BOKEELIA FL 33922
US

Mailing Address

5234 GENESEE PKWY
BOKEELIA FL 33922
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/23/1971

4. FEI Number
59-1823244

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MOHEREK, JANE
5234 GENESEE PKEY
BOKEELIA FL 33922

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME P
MARZELLA, JOE
STREET ADDRESS
11554 FLINT LANE
CITY-ST-ZIP BOKEELIA FL

TITLE
NAME VP
LEONARD, BOB
STREET ADDRESS
5127 GENESE PKWY
CITY-ST-ZIP BOKEELIA FL 33922

TITLE
NAME T
MOHEREK, JANE
STREET ADDRESS
5234 GENESEE PKWY
CITY-ST-ZIP BOKEELIA FL 33922

TITLE
NAME S
MILLER, JOHN
STREET ADDRESS
5766 LINDEN WAY
CITY-ST-ZIP BOKEELIA FL 33922

TITLE
NAME D
DEKKER, TOM
STREET ADDRESS
5724 GENESEE PKWY
CITY-ST-ZIP BOKEELIA FL 33922

TITLE
NAME D
WALDRON, JAMES
STREET ADDRESS
5246 GENESEE PKWY
CITY-ST-ZIP BOKEELIA FL 33922

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jane Moherrek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/99 283-7123
Date Daytime Phone #

CR2E037 (1/98)