

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 10 PM 1:54

DOCUMENT # 726931 (9)
1. Corporation Name
GREENWOOD HOMEOWNERS ASSOCIATION INC

Principal Place of Business
661 CYPRESS WAY EAST
NAPLES FL 33942

Mailing Address
661 CYPRESS WAY EAST
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/11/1973	3a. Date of Last Report 02/22/1994
4. FEI Number 59-1672853	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
SMITH, DORIS A.
640 POMPANO DRIVE
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name Sotireos Vlahopoulos	85 Zip Code 33942
82 Street Address (P.O. Box Number is Not Acceptable) 657 Cypress Way East	
83	
84 City Naples	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Sotireos Vlahopoulos* Sotireos Vlahopoulos DATE April 6, 1995

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP SIEWART, JUNE 639 CYPRESS WAY EAST NAPLES FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV DESTOLFE, MONA 633 CYPRESS WAY E. NAPLES FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SMITH, DORIS 640 POMPANO DRIVE NAPLES FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS HEMINGSEN, LEE VON 660 POMPANO DRIVE NAPLES FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV GREENE, ANETTA 660 POMPANO DRIVE NAPLES FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	☐ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☒ Change ☐ Addition DT Vlahopoulos, Sotireos 657 Cypress Way East Naples, FL 33942
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☒ Change ☐ Addition DV Barryman, Edward 645 Cypress Way East Naples, FL 33942
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sotireos Vlahopoulos* Sotireos Vlahopoulos 4/6/95 (813) 591-1645