FILE NOW: FILING FEE IS \$61.25

FILED Feb 27 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 'ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 735108 (3) CARRIAGE VILLAGE LANDOWNERS' ASSOCIATION, INC. Principal Place of Business Malling Address 5451 BAYSHORE ROAD 5451 BAYSHORE ROAD 3. Date incorporated or Qualified NORTH FORT MYERS FL 33917 NORTH FORT MYERS FL 33917 03/03/1976 4. FEI Number 59-1916766 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 Christopher N. Davies STALEY, WILLIAM Street Address (P.O. Box Number Is Not Acceptable) 82 12601 World Plaza 138 CONESTOGA TRAIL 83 NORTH FT. MYERS FL 33917

Zip Code 33907 Fort Myers 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.

CHRISTOPHER -23-98 Signature, typed or printed name of registered agent and like if applicable (NOTE: Registered Agent signsture required when re ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. **J** DELETE Change TITLE 1.1 TITLE P/D (D)WALTER, RICHARD NAME 1.2 NAME Stoner, Gerald 371 SANTA FE STREET ADDRESS 1.3 STREET ADDRESS 134 Overland Trail N. FORT MYERS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP N.Ft,Myers,Fl. DELETE 1 Change 4 Addition TITLE 2.1 TITLE V.₽./♪ 2.2 NAME NAME EAGLESO, GENE Walter, Mark 131 CHISHOLM STREET ADDRESS 2.3 STREET ADDRESS 392 Santa Fe Trail N. FT. MYERS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP Myers, F1. DELETE Change Addition 3.1 TITLE TITLE T./ D NORVAL, MAGUIRE NAME 3.2 NAME Huntley, Joyce 210 Shenandosh 205 COBBLESTONE STREET ADDRESS 3.3 STREET ADDRESS N FT MEYERS FL CITY-ST-ZIP 3.4. CITY-ST-ZIP N.Ft. Myers, Fl DELETE 4.1 TITLE Change Addition TITLE AS AS/D STIMSON, JO NAME 4 2 NAME Brown, Joyce 20: Brandywine Ln. 211 HARVEST LN STREET ADDRESS 4.3 STREET ADDRESS NORTH FT. MYERS FL 4.4 CiTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE. 5.1 TITLE **BROWN, JOYCE** Bruner, 5.2 NAMÉ 215 Brandywine Ln. 203 BRANDY WINE LN 5.3 STREET ADDRESS STREET ADDRESS N FT MYERS FL 5.4 CITY-ST-ZIP Ft. Myers, CITY-ST-ZIP Z Addition DELETE A 1 TITLE AT/D NAME **HUNTLEY, JOYCE** R 2 NAME Brown, Fred

6.3 STREET ADDRESS
N. FT. MYERS FL

14. 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 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 carporation 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.

SIGNATURE:

Applied For Not Applicable