

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

93 MAY -1 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 751005 (0)

1. Corporation Name

VANDERBILT SURF COLONY, A CONDOMINIUM, SECTION I
I, ASSOCIATION, INC.

Principal Place of Business

Mailing Address

15 BLUEBILL AVE
NAPLES FL 33963

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NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1980

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2099444

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SWALM & MURRELL, P.A.
2375 TAMiami TR N
SUITE 308
NAPLES FL 33940

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 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

Signature, typed or printed name of registered agent and fee # applicable

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	BERKOBEN, CHARLES W
STREET ADDRESS	15 BLUEBILL AVE
CITY - ST - ZIP	NAPLES FL
TITLE	PD
NAME	RITCHIE, RICHARD E.
STREET ADDRESS	1 PENN PLACE, P.O. BOX 95
CITY - ST - ZIP	FORKED RIVER NJ
TITLE	D
NAME	ANDERSON, HENRY B
STREET ADDRESS	304 BRANDYWINE DR
CITY - ST - ZIP	OLD HICKORY TN
TITLE	TD
NAME	SCHULTZ, ROBERT
STREET ADDRESS	410 DEER RUN
CITY - ST - ZIP	NORRISTOWN PA
TITLE	D
NAME	HEUERMAN, RICHARD
STREET ADDRESS	15 BLUEBILL AVE
CITY - ST - ZIP	NAPLES FL
TITLE	VD
NAME	GUY, ELIZABETH B
STREET ADDRESS	13800 FAIRHILL RD
CITY - ST - ZIP	SHAKER HTS. OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Stone, Norbert
3.3 STREET ADDRESS	636 B. Sunset
3.4 CITY - ST - ZIP	Evansville, IN 47713
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	Hyland, Dean
5.3 STREET ADDRESS	15 Bluebill Ave
5.4 CITY - ST - ZIP	Naples, FL 33963
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Guy, Elizabeth B
6.3 STREET ADDRESS	13800 Fairhill Rd
6.4 CITY - ST - ZIP	Shaker Hts, Oh 44120

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 110.07(3)(k), 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.

SIGNATURE: *Richard E. Ritchie*

Richard E. Ritchie

4/26/95 (813)597-9141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #