FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **752938** **(1)**

1. Corporation Name

GLADIOLUS GARDENS CONDOMINIUM ASSOCIATION, SECTI ON II, INC.

Principal Place of Business	Mailing Address
C/O W.W. SCHOO MANAGEMENT. INC. SUITE 8 FT. MYERS FL 33919 US	C/O W.W. SCHOO MANAGEMENT. INC. 12901 MCGREGOR BLVD FORT MYERS FL 33919 US

3. Date Incorporated or Qualified: **06/13/1980**

3a. Date of Last Report: **04/14/1995**

2. Principal Place of Business	2a. Mailing Address
21 9411 Cypress Lake Drive	26 9411 Cypress Lake Drive
Suite, Apt. #, etc. 22 Suite #2	Suite, Apt. #, etc. 27 Suite #2
City & State 23 Fort Myers FL	City & State 28 Fort Myers FL
Zip 24 33919 Country 25 USA	Zip 29 33919 Country 30 USA

4. FEI Number: **59-2165558** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

W.W. SCHOO MANAGEMENT, INC.
12901-8 MCGREGOR BLVD
FT. MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name: W. W. Schoo Management, Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 9411 Cypress Lake Drive
83: Suite #2
84 City: Fort Myers **FL** 85 Zip Code: 33919

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: William Schoo 4-9-96
Signature, typed or printed name of individual authorized by filing officer (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SHOO, WILLIAM 12901-8 MCGREGOR BLVD. FT MYERS FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD Maglott, Glenn 161 Church St. BellvilleOH 44813	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST SCHOLES, DON 8098 COUNTRY ROAD 105 FT. MYERS FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VPD Patton, Garnett 12311 Plantation Drive Spotsylvania VA 22553	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCHOO, PAUL 12747 CHATHAM DR FT MYERS FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	TD James, Raymond 488 Harmony Lane Edinburg VA 22824	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

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)(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: Glenn Maglott
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96
Date

941-481-4700
Daytime Phone #