

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 22 PM 3:40

DOCUMENT # 755258 (1)

1. Corporation Name  
PARADOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address  
C/O SOUTHWEST PROPERTY MGMT CORP 1044 CASTELLO DR #206  
NAPLES FL 33940 C/O SOUTHWEST PROPERTY MGMT CORP  
1044 CASTELLO DR #206  
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country  
25 Country 30 Country

3. Date Incorporated or Qualified 11/24/1980 3a. Date of Last Report 04/14/1994  
4. FEI Number 59-2169329 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOUTHWEST PROPERTY MANAGEMENT  
1044 CASTELLO DR #206  
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 title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ~~60~~  
NAME LANDRUM, JOHN  
STREET ADDRESS 1200 GULF SHORE BLVD NO #304  
CITY-ST-ZIP NAPLES, FL 00000

1.1 TITLE P/D  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ~~70~~  
NAME MOOTS, FAYE  
STREET ADDRESS 1200 GULF SHORE BLVD N #204  
CITY-ST-ZIP NAPLES FL

2.1 TITLE S/T/D  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ~~80~~  
NAME ~~KAHN, SIDNEY~~  
STREET ADDRESS ~~1200 GULF SHORE BLVD N~~  
CITY-ST-ZIP ~~NAPLES FL~~

3.1 TITLE D  Change  Addition  
3.2 NAME Lappen, John  
3.3 STREET ADDRESS 1200 Gulf Shore Blvd. N. #102  
3.4 CITY-ST-ZIP Naples, FL 33940

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John W. Landrum  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-95 263-3089  
Date Expiration Period #