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Mar 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763407 (4)

1. Corporation Name

CALOOSA COUNTRY CLUB ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 5143
SUN CITY CENTER FL 33571-2143P.O. BOX 5143
SUN CITY CENTER FL 33571-51433. Date Incorporated or Qualified
05/24/19823a. Date of Last Report
02/09/1996

4. FEI Number

59-2529059

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida StatutesYes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PYWELL, HARRY E.
2003 WEDGE COURT
SUN CITY CENTER FL 33573

81 Name

FISCHER, JACK

82 Street Address (P.O. Box Number is Not Acceptable)

1701 WEDGE COURT

83

84 City

SUN CITY CENTER

FL

85 Zip Code

33573

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

Signature of individual or printed name of registered agent and/or applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME PYWELL, HARRY E.
STREET ADDRESS 2003 WEDGE COURT
CITY-ST-ZIP SUN CITY CENTER FL1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME FISCHER, JACK
1.3 STREET ADDRESS 1701 WEDGE COURT
1.4 CITY-ST-ZIP SUN CITY CENTER FLTITLE VP ☒ DELETE
NAME UNDERWOOD, WALLACE
STREET ADDRESS 1908 EAST VIEW DR.
CITY-ST-ZIP SUN CITY CENTER FL2.1 TITLE SD ☒ Change ☒ Addition
2.2 NAME MILLER, MAIDA
2.3 STREET ADDRESS 2103 WEST VIEW DR.
2.4 CITY-ST-ZIP SUN CITY CENTER, FLTITLE ☐ DELETE
NAME SOLAND, BONNIE
STREET ADDRESS 1915 EAST VIEW DRIVE
CITY-ST-ZIP SUN CITY CENTER FL3.1 TITLE VP ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE TD ☐ DELETE
NAME SMITHMAN, JOHN
STREET ADDRESS 1927 EAST VIEW DRIVE
CITY-ST-ZIP SUN CITY CENTER FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME BURKE, RICHARD
STREET ADDRESS 2106 WEST VIEW DRIVE
CITY-ST-ZIP SUN CITY CENTER FL5.1 TITLE D ☒ Change ☒ Addition
5.2 NAME KNEELAND, THOMAS
5.3 STREET ADDRESS 1927 EAST VIEW DR
5.4 CITY-ST-ZIP SUN CITY, CENTER, FLTITLE D ☒ DELETE
NAME FISCHER, JOHN
STREET ADDRESS 1701 WEDGE COURT
CITY-ST-ZIP SUN CITY CENTER FL6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME BOONEY, STANLEY
6.3 STREET ADDRESS 2002 WEDGE CT
6.4 CITY-ST-ZIP SUN CITY CENTER, FL

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 419.07(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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone # 0046218

CR2E037 (9/96)