## FILE NOW: FILING FEE IS \$61.25

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 765500

Principal Place of Business

## VILLAS AT RIVER RUN COMDOMINIUM ASSOCIATION, INC

OXBOW DRIVE P. O. BOX 1812 LABELLE FL 33935  CABCULE FL 33935  CABCULE FL 33935								
Principal Place of Business     2a. Mailing Address					3. Date Incorporated or Qualifed			
21 26					10/21/1982			
Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number			Applied For	
22		27			59-2459665		Not Applicable	
City & Stat	e	City & State			5. Certifcate of Status Desired	•	5 Additional Required	
Zip	Country	Zip Cou			6. Election Campaign Financing	\$5.0	<b>)0</b> May Be	
24 33975-1812 25 29 33975.1812 30			Trust Fund Contribution Added to Fees					
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
			}8	1 Name				
ROWLEE, WAYNE E.			82 Street Address (P.O. Box Number is Not Acceptable)					
88 S. MAIN ST.; P.O. BOX 666								
LABELLE FL 33935				3				
LADELLE	16 33300		<u> </u>	4 00		. 85 Z	ip Code	
			8	4 City	F	L  °3   ~	.ip Code	
office or I	to the provisions of Sections 617.0502 registered agent, or both, in the State of im familiar with, and accept the obligati	if Florida. Such change was auth	orized t	ov the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the app	of changing ointment as	its registered registered	
SIGNATURE					required when reinstating) DATE		·	
				istered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.		DELETE	1.1 TITLE		VPD	Chan		
TITLE	D	Ja Decere	.,,		DUBOIS, JOHN	_	-	
NAME	MUNSON, JACK		1.2 NAME 1.3 STREET ADDRESS		OKBOW DR. APT. A-			
STREET ADDRESS	SALE ADDITION OF THE PARTY OF T				LA BELLE FL 33935			
CITY+ST-ZIP	LABELLE FL	□ DELETE	1.4 CITY-ST-ZIP			Chan	ge Addition	
TITLE	PD	UJ VELETE					g- (	
NAME	QUAYLE, ROSE		2.2 NAME					
STREET ADDRESS	CABOTT BILL ALL 1. A EUT			ET ADDRESS				
CITY-ST-ZIP	D IDCLCC . C			-ST-ZIP			ge	
TITLE	SED	☐ DELETE	3.1 TITLE	•	1	Chan	åe □ vagggon	

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 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 it enamped, or on an attachment with an address, with all other like empowered.

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

3.4. CITY-ST-29P

SIGNATURE: 9

TRIPP, LINDA

LABELLE FL

LABELLE FL

LABELLE FL

CAMERON, G

LABELLE FL

VPD

TRED

D

OXBOW DR., #C-204

DONALDSON, DON

KOWATCH, JACK

1 OXBOW DR APT C103

**OXBOW DR APT A-202** 

OXBOW DR. APT B-104

NAME

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STREET ADDRESS

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May 08, 1999 8:00 am Secretary of State

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