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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

766216

(6)

RIVERWOODS PLANTATION RV RESORT CONDOMINIUM ASSO CIATION, INC.

Principal Place of Business		Mailing Address				i 482141 tabild dillit aftild haar sinds alle aftil etsk alek alek alek asen alek				
4600 ROBERT E. LEE BLVD. ESTERO FL 33928		4600 ROBERT E. LEE BLVD. ESTERO FL 33928								
						3. Date Incorporated or Qualified 3a. 12/21/1982	Date of Li 04/1	ast Rer 1/199		
	ace of Business	2a. Mailing Address				4. FEI Number 59-2449892	F	+	lied For	
21		26							Applicable	
Suite, Apt. 6	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	,	roy Ac se Req	dditional uired	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for Intangil		der s. `	199.032,	
24	25	29	30				☐ No			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registers	d Agent			
			ł	81	Name					
ADAMS, JOSEPH E., ESQ.			Ì	82	Street Add	Address (P.O. Box Number is Not Acceptable)				
	R, POLIAKOFF & STREITFELD, P	.A.	}	83			 -	·····		
	BELL TOWER DR, SUITE 101									
FI.MYE	RS FL 33907			64	City		85	Zip C	ode	
11 Pursuant t	to the provisions of Sections 617 050	2 and 617 1508. Florida Statut	tes, the at	OOVE	-named co	rocyation pulpoits this statement for the nurrocy	e of chanc	ing Its	registered	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was	authorizac	אם נ	the corpora	ation's board of directors. I hereby accept the	ppointme	nt as re	egistered	
SIGNATURE										
SIGNATURE	Signature, typod or printed name of registered age			i Age	ni signature req	ulred when reinstating) DATI				
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS A				
TITLE	-9D -	≥ DELETE	1.1 10	TLE		DIRECTOR	Ch Ch	ange	Addition	
NAME	DOWLING, ANN		1.2 NA	ME	1	DOWLING, ANN				
STREET ADDRESS	4711 SPLIT LOG LANE		1.3 ST	REET	ADDRESS	4711 SPLITLOG LANG	<u>.</u>			
CITY-ST-ZIP	ESTERO FL		1.4 €1	TY-S	T-ZIP 6	ESTERO, FL 33928				
TITLE	PD	☐ DELETE	2.1 Til	TLE		DIRECTOR	☐ Ch	ange	Addition	
NAME	NOLANDER, DONALD		2.2 NA	AME		ROY CONRAD	_			
STREET ADDRESS	4500 SAWMILL DRIVE		2.3 ST	REET		4590 LAFILYETTE LANE				
CITY-ST-ZIP	ESTERO FL		2.40	ΠY-5	ST-ZIP	ESTERO FL 33428	r			
TITLE	TD	☐ DELETE	3.1 Ti	TLE			☐ Ch	ange	Addition	
NAME	SHUTT, WARD		3.2 NA	AME						
STREET ADDRESS	4581 SAWMILL DR., E		3.3 \$1	reet	ADORESS					
CITY-ST-ZIP	ESTERO FL		3.4. C	ITY-S	ST-ZIP	·				
TITLE	VD	☐ DELETE	4.1 T)	TLE			☐ Ch	ange	Addition	
NAME	THOMAS, JACK		4.2 N	AME						
STREET ADDRESS	4541 CANDLESTICK COURT	•	4.3 ST	TREET	T ADDRESS					
CITY-ST-ZIP	ESTERO FL		4.4 CI	ITY-S	ST-ZIP					
TITLE	D	☐ DELETE	5.1 TI				<u></u> □ 0	nan ge	Addition	
NAME	GRANDPRE, RAOULL		5.2 N	AME						
STREET ADDRESS	20320 CARRIAGE COURT				T ADDRESS					
CITY-ST-ZIP	ESTERO FL		1		ST-2IP					
TITLE	~з	DELETE	6.1 T!			SECRETARY	XI CI	nange	Addition	
NAME	WILLIAMS, DARLENE		6.2 N		'	WILLIAMS DARLENE				
I INTOINIL.	MILLIONIO, DANILLIAL		I		ı	YY	ששנ			

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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 if the pead are an extractional process.

STREET ADDRESS

4700 WASHINGTON WAY

ESTERO FL

FILED

Jan 31 1997 8:00am

Secretary of State