## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT #** 

766790

(0)

1. Corporatio	n Name	(-)			
EAGLE	RIDGE PROPERTY OWNE	ERS' ASSOCIATION, INC	),		
Principal Plac	e of Business	Malling Address		- I INTRI CENTO ANNO ANNO CENTO C	IRUN ƏNDIN BÜBIN BUBUN ƏNBUN ƏNBUN IBBI
8750-11 GLADK	OLUS DR	6750-11 GLADIOLUS DR		3. Date Incorporated or Qualified	<del></del>
STE 177 STE 177				· '	
FORT MYERS FL 33908 FORT MYERS FL 33908				02/01/1983 4. FEI Number	Applied For
US		US		59-2380226	Not Applicable
2. Principal P	lace of Business	2s. Mailing Address			
21 26		<del></del>		5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>	6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State City & State		<del>  </del>		7. Is this nonprofit corporation a home	
23		28		<u>LJ</u> Y	
Ζίρ	Country	Zip	Country	8. This corporation owes or has paid to	
24	9, Name and Address of Curre		30	Personal Property Tax due June 30.  10. Name and Address of New Regist	
	S	IN THE STATE OF TH	81 Name		
DANIEDI	CAMPEL I		20 0		<del></del>
RANIERI, SAMUEL J. 7537 EAGLE'S FLIGHT LANE FT. MYERS FL 33912			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83	SAME	
11. 111.	110 I C 33812				
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purp	
office or r agent. I a	registered agent, or both, in the Stati im familiar-with; and accept the oblig	e of Florida. Such change was a lations of, Section 617.0503, Flo	uthorized by the corporal rida Statutes.	poration submits this statement for the purp tion's board of directors. I hereby accept the	e appointment as registered
SIGNATURE		nieri.		4/8/	98
	Signature, typed or printed number of registered ag	pent and title if applicable. (NOTE	Registered Agent signature requi		MTE
12.	· · · · · · · · · · · · · · · · · · ·	ND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12  Change Addition
TITLE	PD MONEY MEN	LIS DECEIE	1.1 TIPLE	RESIDENT	
NAME	MCNEIL, KEN		1.2 NAME	KOBERT KIRKSEY A	<sup>‡</sup> /77
STREET ADDRESS	8750 GLADIOLUS DR, #177		1.3 STREET ADDRESS	8750 64010WS 1/2.	20
CITY-ST-ZIP TITLE	FT MYERS FL VPD	LY DELETE	1.4 CITY-ST-ZIP	ICE PRECONDUT	Change Addition
NAME	KIRKSEY, ROBERT		2.2 NAME	ROBERT KIRKSEY FOR SON OF THE MYERS FL. 339 HOE PRESIDENT STUBET	4
STREET ADDRESS	8750 GLADILOUS DR, #177		2.3 STREET ADDRESS	P-750 / LA 12 In LUS DIC	"
CITY-ST-ZIP	FT MYERS FL		2. 4 CITY-ST-ZIP	FT. Myens, FL. 329	08
TITLE	STD	DELETE	3.1 TITLE		Change Addition
NAME	RANIERI, SAMUEL J		3.2 NAME	Same	
STREET ADDRESS	8750-11 GLADIOLUS DR, #1	77	3.3 STREET ADDRESS	UMINU	
CITY-ST-ZIP					
TITLE	FT MYERS FL		3.4. CITY-ST-ZIP		
	D	☐ DELETE	8.4. CITY-ST-ZIP 4.1 TITLE	<u></u>	Change Addition
NAME	D CORACE, ART			Same	Change Addition
NAME STREET ADDRESS	D CORACE, ART 8750 GLADIOLUS DR, #177		4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS	Same	Change Addition
STREET ADDRESS CITY-ST-ZIP	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Same	
STREET ADDRESS CITY-ST-ZIP TITLE	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL D		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL D FREDETTE, LARRY	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 5.2 NAME		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL D FREDETTE, LARRY 8750 GLADIOLUS DR, #177	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	Same	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL D FREDETTE, LARRY	DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL D FREDETTE, LARRY 8750 GLADIOLUS DR, #177	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORACE, ART 8750 GLADIOLUS DR, #177 FT MYERS FL D FREDETTE, LARRY 8750 GLADIOLUS DR, #177	DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition

14. I 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 changed, or on an attachment with an address.

SIGNATURE:

AGANDA ENTRE QUIRED Jec. TREASURE / DIRECTOR 4

CR2E037 (10/97)

**FILED** 

Apr 15 1998 8:00am

Secretary of State