

FILE NOW: FILING FEE IS \$61.25

FILED
May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N06962 (7)
1. Corporation Name
COLONNADES CONDOMINIUM ASSOCIATION OF SANIBEL, I NC.



Principal Place of Business Mailing Address
COLONY RESORT 419 E. GULF DR. SANIBEL FL 33957-1015
COLONY RESORT 419 E. GULF DR. SANIBEL FL 33957-1015

3. Date Incorporated or Qualified
01/04/1985

4. FEI Number Applied For
59-2051571 Not Applicable

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

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. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
EVANS, LARRY W.
419 EAST GULF DR.
SANIBEL FL 33957

10. Name and Address of New Registered Agent
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 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of 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 *Larry W. Evans* LARRY W. EVANS 5-4-98 DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BAGLEY, CHARLES	
STREET ADDRESS	16 ROUNDHILL CT	
CITY-ST-ZIP	DANVILLE IN	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	BUTLER, ZENIA	
STREET ADDRESS	14075 FOOT HILL CIR.	
CITY-ST-ZIP	GOLDEN CO	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	STICKEN J. W.	
STREET ADDRESS	1328 CURTISS AVE.	
CITY-ST-ZIP	AMES IO	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	SHAND, JAMES	
STREET ADDRESS	2313 FAIRHILL LANE	
CITY-ST-ZIP	DAYTON OH	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RUSS, WALTER S	
STREET ADDRESS	358 NARMON BLVD	
CITY-ST-ZIP	DAYTON OH	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	CRAIG BEED	
1.3 STREET ADDRESS	93 E. HILLCREST AVE.	
1.4 CITY-ST-ZIP	CHALFONT, PA 18914	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	1 0000253394 1	
3.4 CITY-ST-ZIP	-05/22/98--01104--016	
4.1 TITLE	***34.28	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	1 0000253394 1	
4.4 CITY-ST-ZIP	-05/22/98--01104--015	
5.1 TITLE	***27.05	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 if changed, or on an attachment with an address.

SIGNATURE: *Larry W. Evans* LARRY W. EVANS 5-4-98 941-472-5151

CR2E037 (10/97)