FILE NOW: FILING FEE IS $61.25

FILED
Feb 06 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N07099** **(7)**

1. Corporation Name

OLD ENGLEWOOD VILLAGE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
R EARL WARREN 359 W DEARBORN ST ENGLEWOOD FL 34223 US	P OBOX 1207 13 BUCHANS LANDING ENGLEWOOD FL 34295-1207 US

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. Box 1207
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Englewood, FL
Zip 24 / Country 25	Zip 29 34295-1207 / Country 30 Sarasota

3. Date Incorporated or Qualified: 01/14/1985
3a. Date of Last Report: 02/06/1996
4. FEI Number: 59-2519334 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WARREN, R EARL
359 W DEARBORN ST
ENGLEWOOD FL 34223

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	V.P.	☐ Change ☒ Addition
NAME	WARREN, R. EARL		1.2 NAME	Karen Goll	
STREET ADDRESS	359 W. DEARBORN ST.		1.3 STREET ADDRESS	232 W. Dearborn St.	
CITY-ST-ZIP	ENGLEWOOD FL		1.4 CITY-ST-ZIP	Englewood, FL 34223	
TITLE	VP	☒ DELETE	2.1 TITLE	V.P.	☒ Change ☐ Addition
NAME	SULLIVAN, JAMES		2.2 NAME	Lise Yust	
STREET ADDRESS	301 W DEARBORN ST		2.3 STREET ADDRESS	444 W. Dearborn St.	
CITY-ST-ZIP	ENGLEWOOD FL		2.4 CITY-ST-ZIP	Englewood, FL 34223	
TITLE	S	☐ DELETE	3.1 TITLE	S	☐ Change ☒ Addition
NAME	YUST, LISE		3.2 NAME	Mary Lou Evans	
STREET ADDRESS	444 W. DEARBORN ST.		3.3 STREET ADDRESS	120 W. Dearborn St.	
CITY-ST-ZIP	ENGLEWOOD FL		3.4 CITY-ST-ZIP	Englewood, FL 34223	
TITLE	T	☐ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	MCCARTHY, CANDACE **		4.2 NAME	Joe Ameling	
STREET ADDRESS	452 W DEARBORN ST		4.3 STREET ADDRESS	300 W. Dearborn St.	
CITY-ST-ZIP	ENGLEWOOD FL		4.4 CITY-ST-ZIP	Englewood, FL 34223	
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	LENTINI, LINDA		5.2 NAME	Bill Blimes	
STREET ADDRESS	1715 BELVEDERE RD		5.3 STREET ADDRESS	1720 Shell Dr.	
CITY-ST-ZIP	ENGLEWOOD FL		5.4 CITY-ST-ZIP	Englewood, FL 34223	
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	HUNTER, LORNA		6.2 NAME	Jack McCarthy	
STREET ADDRESS	150 N. ELM ST.		6.3 STREET ADDRESS	452 W. Dearborn St.	
CITY-ST-ZIP	ENGLEWOOD FL		6.4 CITY-ST-ZIP	Englewood, FL 34223	

CR2E037 (9/96)

14. I do 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: R Earl Warren REQUIRED 1/29/97 (941)474-7768
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR R. Earl Warren Date Daytime Phone # 0064833