FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

DOCUMENT #

N11059

(5)

BETART ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Principal Plac	e of Business	Mailing Address				
3541 GORDON DRIVE NAPLES FL 85540 34102		3541 GORDON DRIVE NAPLES FL 84102-7909				
					3. Date incorporated or Qualified 09/12/1985	3a. Date of Last Report 01/24/1996
2. Principal Place of Business		28. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		26 Cuito Ast # ala		65-0027035	Not Applicable	
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution Added to Fees		
Zıp			Count	ry	8. This corporation has liability for	
24	25	29	30			☐ Yes ☐ No
·····	9. Name and Address of Curre	ent Registered Agent		1 Name	10. Name and Address of New R	egistered Agent
11004/40	NO LINESCOT F (D					
HOWARD, HUBERT E. JR. 3541 GORDON DR.			E	82 Street Address (P.O. Box Number is Not Acceptable)		
NAPLES FL 18841 34102			8	3		
WHI ELG	The second of the second					
			8	4 City		FL B5 Zip Code
office or r	to the provisions of Sections 617.05 egistered agent, or both, in the Statum familiar with, and accept the oblid	e of Florida. Such change wa	s authorized	by the cord	corporation submits this statement for the poration's board of directors. I hereby acceptance	purpose of changing its registered ept the appointment as registered
	in rammar with, and accept the obin	gations or, section of 7.0000,	r ionua statui	es.		
SIGNATURE	Signature Typed or printen name of registered as	jent and title diapplicable (N	OTC: Registered A	gent signaturo	required when reinstating)	DATE
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	
TITLE	8	L_ DELETE 1.17				Change Addition
NAME	HOWARD, BETTYE K.		1.2 NAME			
STREET ADDRESS	3541 GORDON DRIVE NAPLES FL			ET ADDRESS		
CITY+S1+ZIP TITLE			2.1 DTL	- ST - ZIP		Change Addition
NAMÉ	HOWARD, HUBERT E. JR.		2 2 NAM			
STREET ADDRESS	3541 GORDON DRIVE		2 3 STREET ADDRESS			
CITY - S1 - ZIP	NAPLES FL		2 4 0(1)			
TITLE	VD	DELETE	3 1 7ITL		VD JAMES HOLDER	Change Addition
NAME	TAYLOR, ROBERT M.		3 2 NAM	E	211 OT S RD. BARRINGTON HILLS, IL	Sec. 0
STREE1 ADDRESS	3551-00RDON DR.		3.3 STRE	et address	ANKHING DA WICES / TE	41010
CITY - ST - ZIP	NAPLES FL	DELETE		-ST-ZIP		District The second
TITLE	D Lenz, Michael	L DELETE	4.1 TITL			Change Addition
NAME STREET ADDRESS	3539 GORDON DRIVE		4. 2 NAM	et address		
CITY-SI-ZIP	NAPLES FL			-ST-ZIP		
TITLE	IN BLY ! B	DELETE	51 TITL			☐ Change ☐ Addition
NAME:			52 NAM	E		•
STREET ADDRESS			5 3 STRE	et address		
C+TY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	····	5.4 City	·ST-ZIP		
TIFLE		☐ DELETE	6 1 TITL			☐ Change ☐ Addition
NAME			62 NAM			
STREET ADDRESS			63 SIRI	ET ADDRESS		
111V ET 710			■ E 4 O 17 W			

14. If 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: HE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR