## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(9)

## ARLINGTON PARK CONDOMINIUM ASSOCIATION, INC.

					#286 #191 #191 B181
Principal Plac	ce of Business	Mailing Address		E I DOULTON AND STONY FEBRUAR STONY STONY STONY STONY	i Dieji olufi siuli ufêti (45)
P O BOX 812		P O BOX 812 BONITA SPRINGS FL 33959		3. Date Incorporated or Qualified	
BONITA SPRINGS FL 33959				11/21/1986	
				4. FEI Number	Applied For
				65-0075329	Not Applicable
Principal Place of Business     1		2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?	
23		28		☐ Yes ☐ No	
Zip	Country	Zip	Country	8. This corporation owes or has paid the curr	ent year Intangible
24	25		30		Yes No
Name and Address of Current Registered Agent				10. Name and Address of New Registered A	gent
			81 Name		
ZWICK, JOSEPH			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
25622 PARADISE DR			OLCCI AGG	1000 (1.10. Dox realines to recompanie)	_
BONITA SPRINGS FL 33923			83		
			84 City	<del></del>	85 Zip Code
			1	FL.	1 · 1
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 Joseph M. Ferryham 2-1-98.					
	Storature, typed or printed name of registere ag	`	: Registered Agent signature requ		SISSESSES IN AS
12.	D OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12 Change Addition
TITLE	I =	☐ DECEI¢	1.1 TITLE	L	Criainge Addition
NAME	PARKER, BRENT		1.2 NAME		753
STREET ADDRESS	45 SHORES AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	2.1 TITLE	i	Change Addition O
NAME	GREENBERG, KRISTON		2.2 NAME		
STREET ADDRESS	10111 SANDY HOLLOW LAN	Æ	2.3 STREET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS FL		2. 4 CITY-SY-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		Change Addition
NAME	ZWICK, JOSEPH		3.2 NAME		
STREET ADDRESS	25622 PARADISE DR.		3.3 STREET ADDRESS		j
CITY-ST-ZIP	BONITA SPRINGS FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition

CITY-ST-ZIP 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 13 if changed, or on an attachment with an address.

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

City-ST-ZiP

CITY-ST-ZIP

STREET ADDRESS

TITLE

TITLE

NAME

DELETE

DELETE

☐ Change

Addition

**FILED** 

Feb 06 1998 8:00am

Secretary of State

THE CONTRACT CONTRACTOR OF THE PROPERTY OF THE