## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business

12734 KENWOOD LANE

SIGNATURE:

SUITE 32

N19949

(9)

Mailing Address
12734 KENWOOD LANE

SUITE 32

THE FOREST VILLAS HOMEOWNERS' ASSOCIATION, INC.

FT. MYERS FL 33907 US		FI. MYERS FL 3390/-3634 US				3. Date Incorporated or Qualified 04/02/1987	3a. Date of Last Re 05/01/19		
2. Principal P	lane of Rusiness	F = 4 + mr				4. FEI Number		plied For	
C\O Marquis Management, Inc. 12661 New Brittany Blvd.  C\O Marquis Management, Inc. 12661 New Brittany				•		65-0027166	<del>   </del>	Applicable	
						5. Certificate of Status Desired	\$8.75 A		
Fort Myers, Fl. 33907 Fort Myers, Fl. 33907						6. Election Campaign Financing	\$5.00	May Be	
1011 1144 010, 2 11 00 00 1						Trust Fund Contribution	Added to		
na I	losl		30			8. This corporation has liability for I	intangible tax under s.  Yes D No	199.032,	
24	25 9. Name and Address of Curre	29  ont Registered A		<del></del>		Florida Statutes  10. Name and Address of New Re			
81 Stilphen, Peter									
FLEMING, MICHAEL					Marquis Management, Inc.				
12734 KENWOOD LANE SUITE 32					12661 New Brittany Blvd				
FT. MYERS FL 33907				Fort Myers, Fl. 33907					
				84 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.									
agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE Signature, typed or printed name of jogistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
12.		VD DIRECTORS		13.	Bigitatione required	ADDITIONS/CHANGES TO OFFIC		S IN 12	
TITLE	P/D		DELETE	1.1 TITLE	·		☐ Change	Addition	
NAME	HAMLIN, DOROTHY			1.2 NAME					
STREET ADDRESS	16938 VILLAS SQ.		• .	1.3 STREET A	DDRESS .				
CITY-ST-ZIP	FT. MYERS FL 33908			1.4 CITY - ST-	ZIP	·			
TITLE	VPD		☐ DELETE	2.1 TITLE	$\tau \iota$		Change Change	Addition	
NAME	DURHAM, ROBERT		:	2.2 NAME	, ,	•			
STREET ADDRESS	6113 FOREST VILLAS CIR		:	2.3 STREET A	DDRESS				
CITY-ST-ZIP	FT. MYERS FL 33908			2. 4 CITY-ST	-ZIP				
TITLE	VD			3.1 TITLE	VP		Change	Addition	
NAME	SCHLOEMER, CARL			3.2 NAME	. 7.	rancis J. Kell 093 Forest Villas	ey		
STREET ADORESS	12734 KENWOOD LANE FT. MYERS FL 33907			3.3 STREET AL	DURESS 6	ogs youar villas	CCA .	İ	
CITY-ST-ZIP TITLE	TD			3.4. CITY - ST- 4.1 TITLE	-ZIP 7	ort myers, 72 339	708 □ Change	Addition	
NAME	KENDALL, WILLARD			4. 2 NAME	KI	MZBACH JANE .		7,000,000	
STREET ADDRESS	6003 FOREST VILLAS CIRC	LE		4.3 STREET AL	DORESS 60	as forest Villan Cin	ملاد		
CITY-S1-ZIP	FT. MYERS FL			4.4 CITY - ST-		at myers, Fil 3390	-8		
TITLE	SD			5.1 TITLE	13		Change	Addition	
NAME	Griffin, Robert			5.2 NAME	310	ONE EDWIN			
STREET ADDRESS	16975 VILLAS SQUARE		: !	5.3 STREET A	DDRESS OC		• 0		
CITY-ST-ZIP	FT MYERS FL			5.4 CITY - ST -	ZIP 70	nt myero, 7.2 3396			
TITLE			DELETE	6.1 TITLE			☐ Change	Addition	
NAME			1	6.2 NAME					
STREET ADDRESS			1	6.3 STREET A	Doress				
CITY-ST-ZIP	on positive that the information and	and with this differen		6.4 CITY-ST-		la Cantina 440 07/07/0 Filada 6 - 1 -	a 1 E milion mile at the second	ih a	
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.									