

TALLAHASSEE, FLORIDA  
**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
 ANNUAL REPORT  
**1995**



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

APPROVED  
 AND  
 FILED

95 MAY - 1 AM 10: 15

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # N22002 (2)**  
 1. Corporation Name  
**GREENWOOD VILLAGE AT BRECKENRIDGE CONDOMINIUM AS  
 SOCIATION, INC.**

Principal Place of Business Mailing Address

**12734 KENWOOD LANE  
 SUITE 32  
 FT. MYERS FL 33907  
 US**

**12734 KENWOOD LANE  
 SUITE 32  
 FT. MYRS FL 33907  
 US**

2. Principal Place of Business 2a. Mailing Address

**21 Gulf Breeze Management Services Gulf Breeze Mgt. Serv.**

Suite, Apt. #, etc. Suite, Apt. #, etc.

**22 10651 Wood Ibis 27 10651 Wood Ibis**

City & State City & State

**23 Bonita Springs, FL 28 Bonita Springs, FL**

Zip County Zip County

**24 33928 25 Lee 29 33928 30 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/12/1987** 3a. Date of Last Report **05/01/1994**

4. FEI Number **65-0104230** 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**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under s. 199, USFL, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

**GELLES, ROBERT E.  
 C/O MICHAEL FLEMING & ASSOCIATES  
 12734 KENWOOD LANE, SUITE 32  
 FORT MYERS FL 33907**

10. Name and Address of New Registered Agent

**81 Name Joseph Adams**

**82 Street Address (P.O. Box Number is Not Acceptable) Becker & Poliakoff, P.A.**

**83 13515 Bell Tower Drive Suite 101**

**84 City Ft. Myers, FL 85 Zip Code 33907**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE **Joseph P. Adams** *Joseph P. Adams* **April 28, 1995**

Signature, typed or printed name of registered agent if title is acceptable. (NOTE: Registered Agent signature required when resigning.)

12. OFFICERS AND DIRECTORS

TITLE	<b>DS</b>
NAME	<b>BRZYCKI, WALTER</b>
STREET ADDRESS	<b>20025 WOLFEL TRAIL</b>
CITY- ST- ZIP	<b>ESTERO FL</b>
TITLE	<b>VD</b>
NAME	<b>PEAVOY, CHARLES</b>
STREET ADDRESS	<b>20061 WOLFEL TRAIL</b>
CITY- ST- ZIP	<b>ESTERO FL</b>
TITLE	<b>D</b>
NAME	<b>LOTURCO, JOSEPH D.</b>
STREET ADDRESS	<b>19850 SOUTH TAMAMI TR</b>
CITY- ST- ZIP	<b>ESTERO FL</b>
TITLE	<b>PD</b>
NAME	<b>HAREDA, TED</b>
STREET ADDRESS	<b>4280 UTE COURT</b>
CITY- ST- ZIP	<b>ESTERO FL</b>
TITLE	<b>TD</b>
NAME	<b>SHIPP, ED</b>
STREET ADDRESS	<b>4284 UTE CT.</b>
CITY- ST- ZIP	<b>ESTERO FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	<b>D President</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
1 2 NAME	<b>Ray Majerczak</b>
1 3 STREET ADDRESS	<b>20071 Wolfel Trail</b>
1 4 CITY- ST- ZIP	<b>Estero, Florida 33928</b>
2 1 TITLE	<b>D-VP</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME	<b>Charles Peavoy</b>
2 3 STREET ADDRESS	<b>20061 Wolfel Trail</b>
2 4 CITY- ST- ZIP	<b>Estero, Florida 33928</b>
3 1 TITLE	<b>D-Secretary</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME	<b>Walter Brzycki</b>
3 3 STREET ADDRESS	<b>20025 Wolfel Trail</b>
3 4 CITY- ST- ZIP	<b>Estero, Florida 33928</b>
4 1 TITLE	<b>D-Treasurer</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME	<b>John Hinkson</b>
4 3 STREET ADDRESS	<b>20004 Wolfel Trail</b>
4 4 CITY- ST- ZIP	<b>Estero, Florida 33928</b>
5 1 TITLE	<b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME	<b>Joe Quinn</b>
5 3 STREET ADDRESS	<b>20016 Wolfel Trail</b>
5 4 CITY- ST- ZIP	<b>Estero, Florida 33928</b>
6 1 TITLE	
6 2 NAME	
6 3 STREET ADDRESS	
6 4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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, attached, or on an attachment with an address.

SIGNATURE: *Raymond P. ...* **April 28, 1995**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**REMITTED BY MAY 1**