FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N22435

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

THE VILLAGES AT COUNTRY CREEK I HOMEOWNERS ASSOCIATION, INC.

i	Principal Place of Business	Mailing Address	
	21131 COUNTRY CREEK DRIVE ESTERO FL 33928 US	10060 AMBERWOOD RD. UNIT 3 FT. MYERS FL 33913 US	

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

FILED May 06, 1999 8:00 am § Secretary of State

05-06-1999 90165 033 ****61.25



3. Date incorporated or Qualifed

09/10/1987

65-0040528

4. FEI Number

		00		Certificate of Status Desired	Fee Req	uired			
Zip	Country	Zip	Country		6. Election Campaign Financing	□ \$5.00 N	Aav Be		
¬ '	25		30				Fees		
24	9. Name and Address of Current	1771	, ,	10. Name and Address of New Registered Agent					
	o. Hamb and Addiess of Carrent	r.cg.o	81	81 Name					
Sarver, i	LICI EN T		82	82 Street Address (P.O. Box Number is Not Acceptable)					
	BERWOOD RD		32	Street Address (P.O. Box Number is Not Acceptable)					
UNIT 3	BENWOOD ND		83						
ESTERO F	3 33028		94	84 City 85 Zip Code					
						FL			
office or re agent. I a	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	f Florida, Such change was aut	inorizea dv	the corporati	poration submits this statement for the ion's board of directors. I hereby accept	ourpose of changing its re t the appointment as regi	egistered istered		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Age	nt signature requir	ed when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR			
TITLE	P	☐ DELETE	1.1 TITLE			Change	☐ Addition		
NAME	JOLIE, ROLAND		1.2 NAME						
STREET ADDRESS	20910 BLACKSMITH FORGE		1.3 STREE	TADDRESS					
CITY-ST-ZIP	ESTERO FL		1.4 CITY-S	T-ZIP					
TITLE	S	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition		
NAME	MORAMARCO, NICHOLAS		2.2 NAMÉ				-,		
STREET ADDRESS	20887 BLACKSMITH FORGE		2.3 STREE	T ADDRESS			1		
CITY-ST-ZIP	ESTERO FL 33928		2.4 CITY-S	ST-ZIP		Change	[Addition		
TITLE	VPD	☐ DELETE	3.1 TITLE			Change	Addition		
NAME	METZ, MARY		3.2 NAME						
STREET ADDRESS			3.3 STREE	TADORESS					
CITY-ST-ZIP	ESTERO FL		3.4. CITY-S	ST-ZIP		[] Change	Addition		
TITLE	D	☐ DELETE	4.1 TITLE	İ		□ Criange	☐ Addition		
NAME	DODUNSKI, ROBERT		4. 2 NAME				1		
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP	ESTERO FL 33928		4.4 CITY-S	ST-ZIP		[☐ Change	☐ Addition		
TITLE	TD	☐ DELETE	5.1 TITLE			[_] Change	Accilion		
NAME	BRUCH, GEORGE		5.2 NAME	TADDRESS			i		
STREET ADDRESS	21030 BUTCHER'S HOLLER								
CITY-ST-ZIP	ESTERO FL	☐ DELETE	5.4 CITY-5 6.1 TITLE	31-4P		☐ Change	Addition		
TITLE		□ nerete	6.2 NAME						
NAME			1	T ADDRESS					
STREET ADDRESS			6.4 CITY-S	1					
CITY-ST-ZIP	portific that the information supplied with	h this filing does not qualify for			Section 119.07(3)(i), Florida Statutes.	further certify that the in	formation		
• • · · incicuy (sering marine information supplied wit	it and maid acce not dealink for i	and excellipt	stated in	Cooler Collins Collins				

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 12 or Block 13 if changed by on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/99 941 992-0050

R2F037 (11/98)

Applied For

\$8.75 Additional

Not Applicable