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Mar 04 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N22811** (6)

1. Corporation Name

MONTE CARLO CLUB ASSOCIATION, INC.



Principal Place of Business	Mailing Address
10684 GULFSHORE DR NAPLES FL 34108 US	3033 RIVIERA DR SE #103 NAPLES FL 33940 US

3. Date Incorporated or Qualified	
10/02/1987	
4. FEI Number	Applied For Not Applicable
65-0004038	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

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. Is this nonprofit corporation a homeowners association?	☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☐ No

9. Name and Address of Current Registered Agent
GIRARDIN, CAROL E BRIANT & GIRARDIN, PA 3033 RIVIERA DR. SUITE 103 NAPLES FL 34103

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	SPD ☒ DELETE
NAME	EASTMAN, ROGER A
STREET ADDRESS	32 MEETING HOUSE SQUARE
CITY-ST-ZIP	MIDDLETON MA
TITLE	VTD ☒ DELETE
NAME	KOMAN, DONALD R
STREET ADDRESS	10684 GULFSHORE DRIVE, 301-B
CITY-ST-ZIP	NAPLES FL
TITLE	VD ☐ DELETE
NAME	DUNLAP, JOHN A JR.
STREET ADDRESS	10688 GULFSHORE DRIVE, 308-A
CITY-ST-ZIP	NAPLES FL
TITLE	VD ☐ DELETE
NAME	HARRISON, EUGENE H
STREET ADDRESS	10688 GULFSHORE DRIVE, 105-A
CITY-ST-ZIP	NAPLES FL
TITLE	VD ☐ DELETE
NAME	BEBBINGTON, JOHN
STREET ADDRESS	330 TANGLE WOOD
CITY-ST-ZIP	BAY VILLAGE OH 44140
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	PLOOR, JEROME N.
1.3 STREET ADDRESS	8355 ISLAND VIEW RD
1.4 CITY-ST-ZIP	FISH CREEK, WI 54212
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Ferri-Kitzmann, Jean
3.3 STREET ADDRESS	174 Lowell Rd #137
3.4 CITY-ST-ZIP	Mashpee, MA 02649
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **JOHN A. DUNLAP** 2/26/98 941-566-8844

CR2E037 (10/97)