

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N30833** (0)

1. Corporation Name

**MONTARA BONITA BAY ASSOCIATION, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **THE WARNER CORPORATION**  
886 110th Ave. North, #7  
Naples, Florida 33963

Mailing Address: **THE WARNER CORPORATION**  
886 110th Ave. North, #7  
Naples, Florida 33963

3. Date Incorporated or Qualified: **02/23/1989**  
3a. Date of Last Report: **03/29/1994**  
4. FEI Number: **65-0165710**  
Applied For:   
Not Applicable:

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
21. <b>To The Warner Corp.</b>	26. <b>To The Warner Corp.</b>	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
22. <b>886 110th Ave N. Ste 7</b>	27. <b>886 110th Ave N. Ste 7</b>	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	<input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
23. <b>Naples FL</b>	28. <b>Naples, FL</b>	8. This corporation has liability for intangible tax under s. 199.042, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No	
24. <b>33963</b>	25. <b>Collier</b>	29. <b>33963</b>	30. <b>Collier</b>	

9. Name and Address of Current Registered Agent  
**GLEESON, JOHN B**  
27598 MARINA POINTE DR  
BONITA SPRINGS 33923

10. Name and Address of New Registered Agent  
81. Name: **Bryan J. Warner**  
82. Street Address (If Different From 9. Not Applicable): **886 110th Ave N. Ste 7**  
83. City: **Naples**  
84. State: **FL**  
85. ZIP: **33963**

11. Pursuant to the provisions of Sections 607.0902 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: *[Signature]* Prop. Man **1/21/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS, ETC., AND DIRECTORships	
12.1 NAME: <b>PD SMITH, THOMAS</b>	12.2 STREET ADDRESS: <b>3451 BONITA BAY BLVD. BONITA SPRINGS FL</b>	13.1 TITLE: <b>Director</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12.3 NAME: <b>D PLOWMAN, RICHARD</b>	12.4 STREET ADDRESS: <b>3451 BONITA BAY BLVD. BONITA SPRINGS FL</b>	13.2 NAME: <b>Charles Cavallera</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME: <b>ST GLEESON, JOHN M.</b>	12.6 STREET ADDRESS: <b>3451 BONITA BAY BLVD. BONITA SPRINGS FL</b>	13.3 STREET ADDRESS: <b>3237 Montara Dr Bonita Springs, FL 33923</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.7 NAME: <b>VPD BLACK, SHERMAN</b>	12.8 STREET ADDRESS: <b>3318 MONTARA DRIVE BONITA SPRINGS FL</b>	13.4 CITY, ST, ZIP: <b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12.9 NAME: <b>Mr. George Lieberman</b>	12.10 STREET ADDRESS: <b>3364 Montara Drive Bonita Springs, FL 33923</b>	13.5 TITLE: <b>VPD</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.11 NAME: <b>Mr. Robert Titman</b>	12.12 STREET ADDRESS: <b>3272 Montara Drive Bonita Springs, FL 33923</b>	13.6 NAME: <b>ST D</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears as Block 12 or Block 13 or on an attachment with an address.

SIGNATURE: *[Signature]* **Mr. Sherman Black**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X **4/17/95**  
X **495-1962**