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Mar 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N37186** (6)

1. Corporation Name

WINDJAMMER VILLAGE OF NAPLES, INC.

Principal Place of Business

Mailing Address

**220 OCEAN BLVD
NAPLES FL 33942
US**

**220 OCEAN BLVD
NAPLES FL 33942
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/19/1990

4. FEI Number

65-0189175

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. 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

10. Name and Address of New Registered Agent

**SWALM & MURRELL P.A.
2375 TAMiami TRAIL N.
SUITE #308
NAPLES FL 34103**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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	PD	☒ DELETE
NAME	POWERS, GEORGE	
STREET ADDRESS	109 OCEAN BLVD	
CITY-ST-ZIP	NAPLES FL	

TITLE	D	☒ DELETE
NAME	HICKEY, JOHN	
STREET ADDRESS	163 OCEAN BLVD	
CITY-ST-ZIP	NAPLES FL	

TITLE	VD	☐ DELETE
NAME	QUINN, HARRY	
STREET ADDRESS	13 OCEAN BLVD.	
CITY-ST-ZIP	NAPLES FL	

TITLE	TD	☒ DELETE
NAME	CRYDER, JAMES	
STREET ADDRESS	134 ARCTIC WAY	
CITY-ST-ZIP	NAPLES FL 34104	

TITLE	SD	☐ DELETE
NAME	SUMMERS, MERRITT	
STREET ADDRESS	193 OCEANS	
CITY-ST-ZIP	NAPLES FL 34104	

TITLE	D	☐ DELETE
NAME	WALWER, DONALD	
STREET ADDRESS	58 OCEANS BLVD	
CITY-ST-ZIP	NAPLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	OKERBERG, RICHARD	
1.3 STREET ADDRESS	97 OCEANS BLVD	
1.4 CITY-ST-ZIP	NAPLES FL	

2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	MELLETT JUNE	
2.3 STREET ADDRESS	66 ATLANTIC WAY	
2.4 CITY-ST-ZIP	NAPLES FL	

3.1 TITLE	D	☒ Change ☐ Addition
3.2 NAME	QUINN HARRY	
3.3 STREET ADDRESS	13 OCEAN BLVD	
3.4 CITY-ST-ZIP	NAPLES FL	

4.1 TITLE	TD	☐ Change ☒ Addition
4.2 NAME	WILLIAMS, THERESA	
4.3 STREET ADDRESS	184 OCEANS BLVD	
4.4 CITY-ST-ZIP	NAPLES FL	

5.1 TITLE	D	☒ Change ☐ Addition
5.2 NAME	SUMMERS, MERRITT	
5.3 STREET ADDRESS	193 OCEANS BLVD	
5.4 CITY-ST-ZIP	NAPLES FL	

6.1 TITLE	SD	☐ Change ☒ Addition
6.2 NAME	STOREY, CLAIRE	
6.3 STREET ADDRESS	107 OCEANS BLVD	
6.4 CITY-ST-ZIP	NAPLES FL	

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:

SIGNATURE REQUIRED

Richard D. Okerberg 3-11-98

CFR2037 (1097)