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Mar 26 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 # **N96000002800 (8)**
1. Corporation Name

HOME OWNERS OF ALLIGATOR PARK, INCORPORATED

Principal Place of Business 6400 TAYLOR RD PUNTA GORDA FL 33950	Mailing Address 6400 TAYLOR RD PUNTA GORDA FL 33950
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3. Date Incorporated or Qualified

05/28/1996

4. FEI Number

58-2530292

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

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

**DAMONTE, JONATHAN J
12110 SEMNOLE BLVD.
SEMINOLE FL 33778**

10. Name and Address of New Registered Agent

81 Name
Edward L. Wotitzky
82 Street Address (P.O. Box Number is Not Acceptable)
223 Taylor St.
83 City
Punta Gorda **FL** **85** Zip Code
33950

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 Edward L. Wotitzky 3/17/98
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	<input checked="" type="checkbox"/> DELETE
NAME	HENRY, PETER D.	
STREET ADDRESS	6400 TAYLOR RD., #202	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	ROOK, ESTHER B.	
STREET ADDRESS	6400 TAYLOR RD., #A8	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	HENRY, LORRAINE D.	
STREET ADDRESS	6400 TAYLOR RD., #202	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	PENNY, ALEXANDER C.	
STREET ADDRESS	6400 TAYLOR RD., #B13	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	TAYLOR, WILLIAM S.	
STREET ADDRESS	6400 TAYLOR RD., #98	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ADAMS, JUNE C.	
STREET ADDRESS	6400 TAYLOR RD., #180	
CITY-ST-ZIP	PUNTA GORDA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	DONALD ROSE	
1.3 STREET ADDRESS	6400 TAYLOR RD #162	
1.4 CITY-ST-ZIP	PUNTA GORDA FL 33950	
2.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	JO DONNA STOUT	
2.3 STREET ADDRESS	6400 TAYLOR RD #179	
2.4 CITY-ST-ZIP	PUNTA GORDA FL 33950	
3.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	ERNST RICHTER	
3.3 STREET ADDRESS	6400 TAYLOR ROAD #36	
3.4 CITY-ST-ZIP	PUNTA GORDA, FL 33950	
4.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	DAVID LILLY	
4.3 STREET ADDRESS	6400 TAYLOR ROAD #208	
4.4 CITY-ST-ZIP	PUNTA GORDA FL 33950	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	JOSEPH STONE	
5.3 STREET ADDRESS	6400 TAYLOR ROAD #144	
5.4 CITY-ST-ZIP	PUNTA GORDA FL 33950	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	ROBERT WELLER	
6.3 STREET ADDRESS	6400 TAYLOR ROAD #170	
6.4 CITY-ST-ZIP	PUNTA GORDA, FL 33950	

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: Donald Rose 941-639-7000
Signature and typed or printed name of signing officer or director Date Daytime Phone # XXX-XXXX

CR2E037 (10/97)

HOME OWNERS OF ALLIGATOR PARK, INC.
6400 TAYLOR ROAD UNIT 112
PUNTA GORDA, FL 33950

ATTACHMENT TO NONPROFIT CORPORATION ANNUAL REPORT.

ITEM 12, CHANGES IN OFFICERS AND DIRECTORS.

ADDITIONS.

Carlo Bengivenga
6400 Taylor Road #229
Punta Gorda, FL 33950