

FILE NOW: FILING FEE IS \$61.25

FILED
Jul 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000005152 (2)
1. Corporation Name
SIR MICHAEL'S PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 28000 WESTBROOK DRIVE BONITA SPRINGS FL 99929 34135	Mailing Address 28000 WESTBROOK DRIVE BONITA SPRINGS FL 34135-6913
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3. Date Incorporated or Qualified 11/01/1995	3a. Date of Last Report 12/23/1996
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21. Principal Place of Business 22. Suite, Apt. #, etc. 23. City & State 24. Zip 25. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country 34135
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4. FEI Number APPLIED FOR 36-4108212	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**GRAY, DONALD E
28000 WESTBROOK DRIVE
BONITA SPRINGS FL ~~99923~~**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code
34135

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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAY, DONALD E	1.2 NAME	
STREET ADDRESS	28000 WESTBROOK DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 99929	1.4 CITY-ST-ZIP	34135
TITLE	CD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALAGIERO, MICHAEL	2.2 NAME	
STREET ADDRESS	28000 WESTBROOK DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 99929	2.4 CITY-ST-ZIP	34135
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUOPOLO, DAVID	3.2 NAME	
STREET ADDRESS	27657 OLD US 41	3.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 99929	3.4 CITY-ST-ZIP	34135
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

CR2E037 (9/96)

David Puopolo 941-495