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NONPROFIT COMPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OP STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

N97000004217 (2)

BOLLETTIERI RESORT VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address 5500 34 STREET WEST 5500 34 STREET WEST 3. Date Incorporated or Qualified **BRADENTON FL 34210 BRADENTON FL 34210** 07/23/1997 4. FEI Number Applied For 65-67778G3 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 6. Certificate of Status Desired Fee Required 21 Suite Apt # etc Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ No ZS, Yes 23 28 Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 20 26 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HENDRICKSON, ROBERT W III Street Address (P.O. Box Number is Not Acceptable) 1206 MANATEE AVE WEST 83 **BRADENTON FL 34205** 84 City 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 _ | 6/ | Itle it englished (NOTE: D | spiritured Asset signature | required when rejectation) | DATE | |
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| 12. | | | · · · · · · · · · · · · · · · · · · · | ADDITIONS/CHANGES TO OF | | Addition |
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| NAME | MURPHY, JAMES | , . | 3.2 NAME | MERCILL JOHN | 5 | |
| STREET ADDRESS | 5500 34 ST WEST | | 3.3 STREET ADDRESS | 5500 BUTH ST W |), _{- (a} | |
| CITY-ST-ZIP | BRADENTON FL 34210 | | 3.4. CITY-ST-ZIP | BRADENTON F | <u> </u> | |
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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 trusted employeered 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 all achiment with an excites.

SIGNATURE:

3-19-98

FILED

Apr 30 1998 8:00am

Secretary of State

94-755-1000

:R2E037 (10/97)