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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90130 045 ****61.25

DOCUMENT # 751005

1. Corporation Name

VANDERBILT SURF COLONY, A CONDOMINIUM, SECTION I I, ASSOCIATION, INC.

| Principal Place of Business |
|-----------------------------|
| 15 BLUEBILL AVE |
| NAPLES FL 33963 |

Mailing Address

15 BLUEBILL AVE NAPLES FL 33963

| <u> </u> | lace of Business | 2a. Mailing Address | | | 3. Date incorporated or Qualified | |] | |
|----------------------------|--|--|--------------------------|---|--|---------------------------|-------------------|--|
| 21 | | 26 | | | 02/12/1980 | , , | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 4. FEI Number 59-2099444 | | olied For | |
| 22 | | 27 | | | 5972099444 | | Applicable | |
| City & Stat | te | City & State | • | | 5. Certifcate of Status Desired | \$8.75 A Fee Re | | |
| 23 | | 28 | | | | | · | |
| Zip | Country | Zip 34108 30 | Country | | 6. Election Campaign Financing | \$5.00 | • | |
| 24 311 35 25 30 | | | | | Trust Fund Contribution | Added to |) Fees | |
| | 9. Name and Address of Current | Registered Agent | 81 | Name | 10. Name and Address of New Registe | rea Agent | | |
| | | | 81 | Name | | | | |
| SWALM & MURRELL, P.A. | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | |
| 2275 TAMIAMITE NISS | | | | 83 | | | | |
| SHITE and PARCH & START BE | | | | | | | | |
| NAPLES F | -L/33940 대생원 : 원 | | 84 | City | | 85 Zip C | code | |
| ł. | 34,3 | | | | | F L [] | | |
| 11. Pursuant | to the provisions of Sections 617.0502 | and 617.1508, Florida Statutes, | the above | -named cor | poration submits this statement for the purpos | e of changing its | registered | |
| office or I | registered agent, or both, in the State o am familiar with, and accept the obligati | f Florida. Such change was auth ons of. Section 617.0503. Florida | iorized by a Statutes | tne corpora | tion's board of directors. I hereby accept the a | ppominent as res | Jistered | |
| , | an lamina with and accopt the obligation | 0.,0 0., 000.00. | | | | | 1 | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: Re | gistered Agen | t signature requi | red when reinstating) DATE | Ē | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | | |
| TILE | PD | ☐ DELETE | 1.1 TITLE | | D | Change | X Addition | |
| NAME | RITCHIE, RICHARD E | | 1.2 NAME | | MOLINEUX, ROSS | | • | |
| STREET ADDRESS | | | 1.3 STREET | ADDRESS | 15 BLUEBILL AVE | | | |
| CITY-ST-ZIP | NAPLES FL | | 1.4 CITY-S1 | -ZIP | NAPLES FL | | | |
| TITLE | VD | ☐ DELETE | 2.1 TITLE | | D | ☐ Change | Addition | |
| NAME | OBERMAN, JAMES | | 2.2 NAME | | PAREJKO, JAMES | | | |
| STREET ADDRESS | | | 2.3 STREET | ADDRESS | 15 BLUEBILL AVE | | | |
| | NAPLES FL | | 2.4 CITY-S | | NAPLES FL | - 2-2 | | |
| TITLE | O O | ☐ DELET E | 3.1 TITLE | , | NAT DES TE | ☐ Change | ☐ Addition | |
| | T - | | 3.2 NAME | 1 | | | | |
| NAME | ANDERSON, HARRY | | 3.3 STREET | AUUDESS | | | | |
| STREET ADDRESS | | | | | • | | | |
| CITY-ST-ZIP | NAPLES FL | ☐ DELETE | 3.4. CITY-S 4.1 TITLE | 1-217 | | ☐ Change | Addition | |
| TITLE | TD DAVED DODERT | | | | | | | |
| NAME | BAKER, ROBERT | | 4.2 NAME | DODEGO | | | | |
| STREET ADDRESS | , | | 4.3 STREET | 1 | | | | |
| CITY-ST-ZIP | NAPLES FL | □ DELETE | 4.4 CITY-S | | | 1 Change | ☐ Addition | |
| TILE | D | ☐ DELETE | 5.1 TITLE | | SD | A Change | C 1 adulo | |
| NAME | KAYSER, JEAN | • | 5.2 NAME | | KAYSER, JEAN | | | |
| STREET ADDRESS | | | 5.3 STREET | 1 | 15 BLUEBILL AVE | | | |
| CITY-ST-ZIP | NAPLES FL | | 5.4 C/TY-S | r-zip | NAPLES FL | | | |
| TITLE | SD | □ ADELETE | 6.1 TITLE | | | ☐ Change | ☐ Addition | |
| NAME | GUY, ELIZABETH B | | 6.2 NAME | | | | | |
| STREET ADDRESS | 13800 FAIRHILL RD | | 6.3 STREET | ADDRESS | | | İ | |
| CITY ST. 7ID | SHAKER HTS. OH | | 6.4 CITY-S | r-ZIP | | | | |

14.3 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 for on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Richard Richard Chapter 617, President

SIGNATURE AND TYPED OR

Daytime Phone #