

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90147 007 ****61.25

DOCUMENT # N29125

1. Corporation Name

REGENT PARK VILLAS II ASSOCIATION, INC.

431276 - 90147 - 7

Principal Place of Business

10770 QUEEN ANNE LANE
NAPLES FL 33942
US

Mailing Address

P.O. BOX 7105
NAPLES FL 34101
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

11/04/1988

4. FEI Number

65-0095109

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

9. Name and Address of Current Registered Agent

KUETER, BEVERLY
C/O SUNBURST MGMT CORP
2079 J & C BLVD
NAPLES FL 34109

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

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 ~~DS~~ ☒ DELETE
NAME ~~GOLD, GERRIE~~
STREET ADDRESS ~~10806 REGENT CIRCLE~~
CITY-STATE-ZIP ~~NAPLES FL~~

TITLE ~~DVP~~ ☐ DELETE
NAME ~~BUTTONS, RICHARD~~
STREET ADDRESS ~~3366 ERICK LANE DRIVE~~
CITY-STATE-ZIP ~~NAPLES FL~~

TITLE ~~T~~ ☒ DELETE
NAME ~~CASTELVECCHI, SOPHIE~~
STREET ADDRESS ~~10770 QUEEN ANNE LANE~~
CITY-STATE-ZIP ~~NAPLES FL~~

TITLE ~~D~~ ☒ DELETE
NAME ~~BARTLET, JEAN~~
STREET ADDRESS ~~10810 QUEEN ANNE LANE~~
CITY-STATE-ZIP ~~NAPLES FL~~

TITLE ~~DP~~ ☒ DELETE
NAME ~~TEEGARDEN, RICHARD~~
STREET ADDRESS ~~10762 QUEEN ANNE LANE~~
CITY-STATE-ZIP ~~NAPLES FL~~

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME ~~1. VP~~
1.3 STREET ADDRESS ~~Gehring, Dave~~
1.4 CITY-STATE-ZIP ~~10742 Henry Ct.~~
~~NAPLES, FL~~

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME ~~2. P~~
2.3 STREET ADDRESS ~~Button, Richard~~
2.4 CITY-STATE-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME ~~3. S~~
3.3 STREET ADDRESS ~~O'Neill Don~~
3.4 CITY-STATE-ZIP ~~10809 King George Ln.~~
~~NAPLES, FL~~

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME ~~4. P~~
4.3 STREET ADDRESS ~~Bowen, Pauline~~
4.4 CITY-STATE-ZIP ~~1364 ERICK LAKE DR.~~
~~NAPLES, FL~~

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME ~~5~~
5.3 STREET ADDRESS ~~Kerr, Ruth~~
5.4 CITY-STATE-ZIP ~~3326 ERICK LAKE DR.~~
~~NAPLES, FL~~

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/99 9:41/591-2040
Date Daytime Phone #

CR2E037 (11/98)

0063065