05171999-90080-044-$61.25-$61.25

FILED
May 17, 1999 8:00 am
Secretary of State
05-17-1999 90080 044 ****61.25

578162 - 90003 - 16

NONPROFIT CORPORATION ANNUAL REPORT **1999**

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

DOCUMENT # 725706

1. Corporation Name
MYAKKA VALLEY RANCHES IMPROVEMENT ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
74-10A MYAKKA VALLEY TRAIL PO BOX 21463 SARASOTA FL 34276-4463	74-10A MYAKKA VALLEY TRAIL PO BOX 21463 SARASOTA FL 34276-4463

2. Principal Place of Business (21) — Suite, Apt. #, etc. (22) — City & State (23) — Zip (24) — Country (25)

2a. Mailing Address (26) — Suite, Apt. #, etc. (27) — City & State (28) — Zip (29) — Country (30)

3. Date Incorporated or Qualifed: 03/02/1973

4. FEI Number: 59-1510999 ☐ Applied For ☐ Not Applicable

5. Certifcate 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

GOCIO, WILLIAM
6641 COUNTRY RD
SARASOTA FL 34241

10. Name and Address of New Registered Agent

81 Name: BARBARA VOEGELIN
82 Street Address (P.O. Box Number is Not Acceptable)
83: 5670 Howard Creek Rd
84 City: Sarasota, FL — FL — 85 Zip Code: 34241

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: Barbara M Voegelin Sec. DATE: May 15, 1999
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WALLACE, MICHAEL 6651 PRAIRIE JUNCTION TR SARASOTA FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition President Leslie Fortune 5240 Myakka Valley Tr. Sar. 34141
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GOCIO, WILLIAM 6641 COUNTRY RD. SARASOTA FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition V. Pres. Jame DeUnger 5246 Myakka Valley Tr. Sar. 34141
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LEON, KEN 5251 MYAKKA VALLEY TRAIL SARASOTA FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition Secretary Barbara Voegelin 5670 Hoaward Creek Rd. Sar. 34141
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S POUSO, SUSANA 5549 HOWARD CREEK RD SARASOTA FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition Treasurer Christine Schaefer 6862 Papago Rd. Sar. Fl 34241
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PITTMAN, BETTY 5952 SHEPS ISLAND RD SARASOTA FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition SAME
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMPSON, KATHRYN 4834 MYAKKA VALLEY TR SARASOTA FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☒ Change ☐ Addition Linda Ferry 6683 Old Ranch Rd. Sarasota, FL 34241

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: Barbara M Voegelin Sec. 5/15/99 (941) 921-6960
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)