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NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

(1)

Mailing Address

GEORGE TOWN OWNERS ASSOCIATION, INC.

8 GEORGE TOWN 8 GEORGE TOWN FORT MYERS FL 33919-1017 FORT MYERS FL 33919 3. Date Incorporated or Qualified 02/05/1962 3a. Date of Last Report 08/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2355675 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MICHASI Hornbrck HUSSEY, JERBY 82 Street Address (P.O. Box Number is Not Acceptable) Grongs Tenn 10 GEORGE TOWN 83 FT. MYERS FL 33919 City 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 egent, 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 at each the obligations of Section 617.0503, Florida Statutes. ᢗ᠂ᢆᢓᢖ᠂ᢒᡝ SIGNATURE Signature, typed or punted name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. 96/6) (96/6) Change Addition ☐ DELETE 1.1 TITLE TITLE ENGVALSON, KINLEY NAME 1.2 NAME 31 GEORGE TOWN 1.3 STREET ADDRESS STREET ADDRESS FT MYERS FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE ٧D 2.1 TITLE CONGER, J. W NAME 2.2 NAME 20 GEORGE TOWN STREET ADDRESS 2.3 STREET ADDRESS FT MYERS FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP ■ DELETE Change ☐ Addition TITLE 3.1 TITLE HORNOECK, MICHAEL NAME 3.2 NAME Hornbeck 8 GEORGE TOWN 3.3 STREET ADDRESS STREET ADDRESS FT MYERS FL 3.4. CITY-ST-ZIP CITY-S1-ZIP DELETE ☐ Change ☐ Addition 41 TITLE TITLE ORR. JAMES NAME 4.2 NAME 21 GEORGE TOWN 4.3 STREET ADDRESS STREET ADDRESS FT MYERS FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE PROSSEN, PEGGY NAME 5.2 NAME 17 GEORGE TOWN 5.3 STREET ADDRESS STREET ADDRESS FT MYERS FL CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE מ KANAVOS, MARK NAME 6.2 NAME 19 GEORGE TOWN **6.3 STREET ADDRESS** STREET ADDRESS FT. MYERS FL

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

SIGNATURE:

appears in Block 12 or Block 13 if

FILED

May 29 1997 8:00am

Secretary of State

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