## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandre B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name

(2)

VINEY	ard of the Islands, in	G.					
Principal Place	e of Business	Mailing Address				DIN BIRN BIRN DIN	ik elasi bibil 1991
		4115 SANIBEL CAPTIVA RD. SANIBEL FL 33957-3029 US	,		Date Incorporated or Qualified	3a. Date of Last	ı Report
					11/03/1964	04/26/	1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number 59-6529160	<b>├</b>	Applied For
21	# nlo	Suite, Apt. #, etc.			39 0329 100		Not Applicable
Suite, Apt.	#, etc.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired		Additional Regulred
City & State	е	City & State			6. Election Campaign Financing		O May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Country	<i>f</i>	8. This corporation has liability for		s. 199.032,
24	25		10			Yes No	
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Ro	egistered Agent	
			["	I I I I I I I I I I I I I I I I I I I			
LEVY, WAYNE T.			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)	
9217 DIMMICK DR Sanibel Fl 33957			83	<del> </del>			
OMINDL	L   L 00901		-			1-1-	
			84	City		FL  85   Zi	ip Code
office or r agent. I a					poration submits this statement for the tion's board of directors. I hereby acce		as registered
12.	Signature, typed or profed name of registered ag	nent and title if applicable. (NOTE:	Registered Ag	ent signature requ	lred when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTI	ORS IN 12
TITLE	PD	DELETE	1.1 TITLE		ADDITIONS OF INNAED TO STEE	☐ Chang	
NAME	STILSON, JAMIE J.		1.2 NAME			-	_
STREET ADDRESS	4115 CAPTIVA RD.		1 3 STREE	T ADDRESS			
CITY-ST-ZIP	SD		1.4 CITY-	ST-ZIP	·		
TITLE	ST	☐ DELETE	21 TITLE			☐ Chang	e Addition
NAME	LEVY, WAYNE		2.2 NAME				
STREET ADDRESS	8217 DIMMICK DR			T ADDRESS			
CITY - ST - ZIP	SANIBEL FL	Lociere	2.4 CiTY	ST-ZIP			A Addition
TITLE	D DECEMBER OF OPER	☐ DELETE	3.1 TITLE			Chang	e Addition
NAME	MINSHALL, GEORGE 2230 CAMINO DEL MAR		3.2 NAME				
STREET ADDRESS	SANIBEL FL		3.3 STREE	T ADDRESS			
CIFY-ST-ZIP TITLE	D SAMIDEL PL	DELETE	4.1 TITLE	- 31 - LIF		Chang	e Addition
NAME	MANDERSCHEID, BOB	beautiful or my rate 1 hr	4. 2 NAME	.			
STREET ADDRESS	4262 RUSHING RIVER RD			T ADDRESS			
CITY-ST-ZIP	SEVIEVILLE TN		4.4 CITY -	1			
TITLE		☐ DELETE	5.1 YITLE			Chang	e Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			

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 angual 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.

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

NAME

DELETE

Daytime Phone # 0057966

Change

Addition

**FILED** 

Jan 27 1997 8:00am

Secretary of State