

3-10-98 B-3058 c
FILE NOW: FILING FEE IS \$61.25

FILED
Mar 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **714587** (3)
1. Corporation Name
CAPE CORAL RETIRED OFFICERS ASSOCIATION, INC.



Principal Place of Business 5624 RIVERSIDE DR CAPE CORAL FL 33990 US	Mailing Address PO BOX 0508 CAPE CORAL FL 33990 US
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3. Date Incorporated or Qualified

05/14/1968

4. FEI Number

23-7229224

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WOJNAR EDWARD
5642 RIVERSIDE DR
CAPE CORAL FL 33990**

81 Name

SURICO, JOSEPH

82 Street Address (P.O. Box Number is Not Acceptable)

1415 SW 52ND LANE

83

84 City

CAPE CORAL

FL

85 Zip Code

33914

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

Joseph B. Surico

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 ☒ DELETE

NAME **WOJNAR, EDWARD**
STREET ADDRESS **5642 RIVERSIDE DRIVE**
CITY-ST-ZIP **CAPE CORAL FL**

TITLE ☒ DELETE

NAME **SURICO, JOSEPH**
STREET ADDRESS **1415 SW 52ND LANE**
CITY-ST-ZIP **CAPE CORAL FL**

TITLE ☐ DELETE

NAME **JENISTA, GEORGE B.**
STREET ADDRESS **1910 SE 37TH STREET**
CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE ☐ DELETE

NAME **POWELL, HARRY K.**
STREET ADDRESS **1922 SE 45TH STREET**
CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE ☐ DELETE

NAME **FREENY ROBERT M**
STREET ADDRESS **902 SW 48TH TERR 204**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ DELETE

NAME **RICH, CLANCY**
STREET ADDRESS **5248 TIFFANY CT.**
CITY-ST-ZIP **CAPE CORAL FL 33904**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **PD SURICO, JOSEPH**
1.3 STREET ADDRESS **1415 SW 52ND LANE**
1.4 CITY-ST-ZIP **CAPE CORAL, FL 33914**

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME **JOHNSON, THOMAS M.**
2.3 STREET ADDRESS **5237 SUNSET CT**
2.4 CITY-ST-ZIP **CAPE CORAL, FL 33904**

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP **33904**

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP **33904**

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP **33914**

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP **33904**

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.

SIGNATURE:

George B. Demich

2/11/98 (941)945-2458

CR2E037 (10/97)