FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # 718251**

1. Corporation Name

LEONARDO ARMS BEACH CLUB CONDOMINIUM ASSOCIATION UNIT 1, INC.

Principal Place of Business CONDOMINIUM ASSOCIATION UNIT 1 INC 7400 ESTERO BOULEVARD FORT MYERS BEACH FL 33931

Mailing Address

CONDOMINIUM ASSOCIATION UNIT I INC 7400 ESTERO BOULEVARD FORT MYERS BEACH FL 33931

FILED Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90077 040 ****61.25



2. Principal P	lace of Business	2a. Mailir	ng Address				3. Date Incorporated or Qualife	ed			
·		26					03/25/1970				
Suite, Apt.	#, etc.		, Apt. #, etc.				4. FEI Number			pplied For	
12		27					59-1282221		N	ot Applicable	
City & Stat	e	City &	& State				5. Certifcate of Status Desired		* - · -	Additional lequired	
2i p	Country	Zip		Country	,		6. Election Campaign Financin		\$5.00	May Ba	
				1 .			Trust Fund Contribution	a 🗆	S5.00 May Be Added to Fees		
24 25 29 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				10 7 000		
	3. Maile and Address of Odirent	regioner en	r.go	81	Name						
CLARK, ADRIAN					82 Street Address (P.O. Box Number is Not Acceptable)						
7400 ESTERO BLVD.											
FT. MYERS BEACH FL 33931				83							
				84	City			r.	85 Zip	Code	
					L			FL			
11. Pursuant	to the provisions of Sections 617.0502 egistered agent, or both, in the State of	and 617.150	18, Florida Statutes,	the above	e-named the com	t corpora coration's	ation submits this statement for the board of directors. I hereby acc	he purpose of cept the appo	r changing ii intment as r	s registerea egistered	
agent. I a	m familiar with, and accept the obligation	ns of, Section	on 617.0503, Florida	a Statutes	i.				,		
SIGNATURE.	Nowon (15 C		ADR	IAN	CCA	RK		3/12	799		
	Signature, typed or printed name of registered agent a		······		nt signature	required w	hen reinstating)	DATE		ODC IN 42	
12.	OFFICERS AND	DIRECTOR		13.		1	ADDITIONS/CHANGES TO C	JEFICERS A	Change	□ Addition	
TITLE	SD		☐ DELETE	1.1 TITLE					[] Glange		
NAME	Warner, raymond			1.2 NAME							
STREET ADDRESS	7400 ESTERO BLVD			1.3 STREE	TADDRESS	3					
CITY-ST-ZIP	FT MYERS BEACH FL 33931			1.4 CITY-S	T-ZIP	<u> </u>	_				
TITLE	D		DELETE	2.1 TITLE	.D	Dir	ector		Change	Addition	
NAME	ZEILSTRA, MARK			2.2 NAME		MAR	RARET DODD	′			
STREET ADDRESS	7400 ESTERO BLVD			2.3 STREE	T ADDRESS	740	B-ESTEEU_LING	77			
CITY-ST-ZIP	FT MYERS BCH FL 33931			2. 4 CITY-5	ST-ZIP	IFT.	Myers Beach	th 3	39.51		
TITLE	P		☐ DELETE	3.1 TITLE					Change	☐ Addition	
NAME	MALO, ARTHUR			3.2 NAME							
STREET ADDRESS			į	3.3 STREE	T ADDRESS	s					
CITY-ST-ZIP	FT MYERS BCH FL 33931			3.4. CITY-5							
TITLE	1		☐ DELETE	4.1 TITLE					Change	Addition	
NAME	DIAMOND, BARBARA			4. 2 NAME							
STREET ADDRESS				4.3 STREE	T ADORESS	s					
CITY-ST-ZIP	FT MYERS BCH, FL 00000 3393	1		4.4 CITY-S		1					
TITLE	VP	<u></u>	☐ DELETE	5.1 TITLE	. ="				[] Change	Addition	
NAME	HARTUNG, ROBERT			5.2 NAME		1					
STREET ADDRESS				5.3 STREE	T ADDRESS	3					
	FT MYERS BCH, FL 00000 3393			5.4 CfTY-S							
CITY-ST-ZIP	FIMICAS DUA, PL UUUUU 3393		☐ DELETE	6.1 TITLE		+			Change	Addition	
TITLE				6.2 NAME							
NAME				l	TANNOESS	,					
STREET ADDRESS				0.3 STREE	TADDRESS	'					

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: