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

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 719845

### HOLLY GREENS VILLA, INC.

Principal Place of Business									
3070 GULF SHORE BLVD NO NAPLES FL 34103									

TITLE

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# **FILED** Mar 01, 1999 8:00 am **Secretary of State**

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	MENT # 719845								
1. Corporation Name HOLLY GREENS VILLA, INC.						130930	- 90100 - 46	· · · · · · · · · · · · · · · · · · ·	
Bringing Plac	o of Business	Mailing Address							
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		3070 GULF SHORE BLVD NAPLES FL 33940	<b>*</b> O						
2. Principal P	lace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed	<u> </u>		
1		26				12/14/1970		<del>-1</del>	
Suite, Apt.	#, etc ~-	Suite, Apt. #, etc.				4. FEI Number 59-1405101		<del></del>	Applicable
2		27				39-1403101	·	\$8.75 AG	Applicable
City & Stat	te	City & State				5. Certificate of Status Desired		Fee Req	
3	Country		Coun	itry		6. Election Campaign Financing		\$5.00 N	
Zip	´		30	,		Trust Fund Contribution		Added to	- 1
4	9. Name and Address of Current		<del>50;</del>			10. Name and Address of New	Registered	Agent	
	5. Nume and Address 5. Carren	. Nogoto va vigani		81 N	lame				
CTETI ED	DOMALD I		-	82 5	Street Addre	ess (P.O. Box Number is Not Accep	table)		
STETLER, RONALD L.			{	52	SI EEL AUUN	ess (P.O. Box Humber is Not Accep-	,abio)		
201 8TH STREET, S., STE 308 NAPLES FL 34102				83	·				_
MAPLES	1 54102		}-	84 (	Nih.			85 Zip Co	ode
poster or					City		FL	.     '	
office or r	to the provisions of Sections 617.050/ registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida, Such change was at tions of, Section 617.0503, Flor	ida Statu	tes.	corporatio	on's board of directors. Thereby acce	pt the appoi	ntment as regi	stered
42	Signature, typed or printed name of registered agen OFFICERS AN		13.	Agent sig	mature required	ADD(TIONS/CHANGES TO O		D DIRECTOR	S IN 12
TITLE	VD OFFICERS AIN	DELETE	1.1 TITL	LE	<del> </del>		7	Change	Addition
NAME	STARK, KEN		1.2 NAM						1
STREET ADDRESS	AATA OUR F OUGGE BUILD M		1.3 STREET ADDRESS		DRESS				į
CITY-ST-ZIP	NAPLES FL 34103		1.4 CITY-ST-ZIP						
TITLE	PD PD	☐ DELETE	2.1 TITI					☐ Change	Addition
NAME	MEYERS, MIKE		2.2 NA	ME					
STREET ADDRESS	AATA OUE OUODE DUE N		2.3 STF	REET AD	ORESS				
CITY-ST-ZIP	NAPLES FL 34103		2. 4 CIT	TY-ST-Z	ie				
TITLE	VD	☐ DELETE	3.1 TITLE					Change	☐ Addition
NAME	WHELAN, ALBERT		3.2 NA	MΕ					}
STREET ADDRESS	3070 GULF SHORE BLVD N		3.3 STF	REET AC	DRESS				[
CITY-ST-ZIP	NAPLES FL								i
TITLE	18 11 020 13	<u>.</u>		Y-ST-Z	IP				C Applition
HILE	VD	☐ DELETE	4.1 TIT	LE	IP			Change	☐ Addition
NAME	VD HOMER, EDWIN	☐ DELETE	4.1 TIT	LE				Change	☐ Addition
NAME	VD HOMER, EDWIN 3070 GULF SHORE BLVD N	☐ DELETE	4.1 TITE 4.2 NA 4.3 STE	LE JME REET AL	ORESS			Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	VD HOMER, EDWIN 3070 GULF SHORE BLVD N NAPLES, FL 00000		4.1 TITI 4. 2 NA 4.3 STF 4.4 CIT	LE ME REET AL Y-ST-Z	ORESS				
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NAPLES, FL 00000 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 toystee 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:

1-4-99 262-3116