

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 722293 (8)

1. Corporation Name

CRECIENTE CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

**7150 ESTERO BLVD.
FT. MYERS BEACH FL 33931**

Mailing Address

**7150 ESTERO BLVD.
FT. MYERS BEACH FL 33931**



3. Date Incorporated or Qualified
12/17/1971

3a. Date of Last Report
04/12/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-1470307

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BECKER & OIKUAJIFF OA
13515 BELL TOWER DRIVE
FORT MYERS FL 33907

mis spelled

81 Name

Becker & Poliahoff, P.A.

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

The Colonnades -13515 Bell Tower Dr., Suite 101

83

84 City

Fort Myers

FL

85 Zip Code
33907

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

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	D	☐ DELETE
NAME	NAGEL, KENNETH	
STREET ADDRESS	1400 E. HANSELMAN RD.	
CITY-ST-ZIP	ANGOLA IN	
TITLE	VO	☐ DELETE
NAME	POLK, BEN	
STREET ADDRESS	7146 ESTERO BLVD. 913	
CITY-ST-ZIP	FT. MYERS BEACH FL	
TITLE	D	☐ DELETE
NAME	PETERMAN, MARK	
STREET ADDRESS	OLIVER LAKE, 5000 - S 150 EAST	
CITY-ST-ZIP	FORT MYERS BEACH FL	
TITLE	D	☐ DELETE
NAME	COLE, ELDREDGE	
STREET ADDRESS	7150 ESTERO BLVD., #402	
CITY-ST-ZIP	FORT MYERS BEACH FL	
TITLE	D	☐ DELETE
NAME	STROEMER, CHUCK	
STREET ADDRESS	7146 ESTERO BLVD #616	
CITY-ST-ZIP	FT MYERS BCH FL	
TITLE	D	☐ DELETE
NAME	MADER, GERALD	
STREET ADDRESS	7148 ESTERO BLVD S220	
CITY-ST-ZIP	FT MYERS BCH. FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TD	☐ Change ☒ Addition
1.2 NAME	Ray, Howard	
1.3 STREET ADDRESS	7146 Estero Blvd., #711	
1.4 CITY-ST-ZIP	Ft Myers Bch, FL 33931	
2.1 TITLE	SD	☐ Change ☒ Addition
2.2 NAME	Fortson, Jeanette	
2.3 STREET ADDRESS	7146 Estero Blvd., #517	
2.4 CITY-ST-ZIP	Ft. Myers Bch, FL 33931	
3.1 TITLE	D	☐ Change ☒ Addition
3.2 NAME	Leyland, Lucille	
3.3 STREET ADDRESS	7150 Estero Blvd., #407	
3.4 CITY-ST-ZIP	Ft. Myers Bch, FL 33931	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	PD	☒ Change ☐ Addition
6.2 NAME	Mader, Gerald	
6.3 STREET ADDRESS	4148 Estero Blvd., #220	
6.4 CITY-ST-ZIP	Ft Myers Bch, FL 33931	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Gerald Mader*

President, Gerald Mader

04/12, 1996

941-463-9604

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)