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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # 724544

1. Corporation Name

SORRENTO VILLAS, SECTION 5, ASSOCIATION, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

P.O. BOX 342 NOKOMIS FL 34275 P.O. BOX 342 NOKOMIS FL 34275

2a. Mailing Address

26 PO Box 342

FILED Apr 22, 1999 8:00 am § Secretary of State

04-22-1999 90087 012 ****61.25



Date Incorporated or Qualifed

10/13/1972

City & State 28 Nokomis FL S. Certificate of Status Desired \$8.75 Additional Fee Required \$20 \$20 \$20 \$24 \$24 \$24 \$24 \$24 \$25	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Number		1 Apr	NIEG FOI	
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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 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, 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, application 617.0503. Florida Statutes. 12.	SARASOTA	A FL	ľ	3			•				
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4. 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:

KALLIGO DE SOURCE KATHEEDG. LETTER TEASURER 4/17/9 941-966-5507

INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Dayling Phone #

CB2En37 (11/98)