FILE NOW: FILING FEE IS $61.25

FILED
Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **728254** **(4)**

1. Corporation Name

COUNTRY CLUB MANOR CONDOMINIUM ASSOCIATION OF NA PLES, INC.

Principal Place of Business	Mailing Address
C/O INTERGRATED PROP. MGT. 3435 10TH STREET. NORTH. SUITE 201 NAPLES FL 33940 US	C/O INTEGRATED PROP. MGT. 3435 10TH STREET. NORTH. #201 NAPLES FL 33940 US

3. Date Incorporated or Qualified: 01/16/1974

4. FEI Number: 59-1529413 ☐ Applied For ☐ Not Applicable

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

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MELLON, JACK D. CPA
844 ANCHOR ROD DRIVE
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	☐ DELETE	1.1 TITLE	VD	☒ Change ☐ Addition
NAME	MORRISON, ED		1.2 NAME	GUZINSKI, JOHN	
STREET ADDRESS	5497 RATTLESNAKE HMK RD #C-107		1.3 STREET ADDRESS	5499 RATTLESNAKE HAMMOCK RD. #A108	
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP	NAPLES FL 34113	
TITLE	P.	☐ DELETE	2.1 TITLE	D	☒ Change ☐ Addition
NAME	ZESSACK, DALE		2.2 NAME	MORRISON, ED	
STREET ADDRESS	5419 RATTLESNAKE HAMMOCK, #F302		2.3 STREET ADDRESS	5497 RATTLESNAKE HAMMOCK RD. #C107	
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP	NAPLES FL 34113	
TITLE	T	☐ DELETE	3.1 TITLE	D	☒ Change ☒ Addition
NAME	HAINS, GEORGE		3.2 NAME	CAMPBELL, DAVID	
STREET ADDRESS	5499 RATTLESNAKE HAMMOCK, #A308		3.3 STREET ADDRESS	5419 RATTLESNAKE HAMMOCK RD. #F304	
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-ZIP	NAPLES FL 34113	
TITLE	D	☒ DELETE	4.1 TITLE	D	☒ Change ☒ Addition
NAME	JONES, ROBERT E.		4.2 NAME	JOHNSTON, DORA	
STREET ADDRESS	5467 RATTLESNAKE HMK RD #C-301		4.3 STREET ADDRESS	5435 RATTLESNAKE HAMMOCK RD. #C105	
CITY-ST-ZIP	NAPLES FL		4.4 CITY-ST-ZIP	NAPLES FL 34113	
TITLE	D	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	RICHARDSON, RAYMOND		5.2 NAME		
STREET ADDRESS	5419 RATTLESNAKE HAMMOCK, #F303		5.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		5.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HABIG, VEORA		6.2 NAME		
STREET ADDRESS	5483 RATTLESNAKE HMK RD #B-206		6.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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. DALE R. ZESSACK

SIGNATURE: Dale R. Zessack REQUIRED 4/6/98 941-774-7479