

FILE NOW: FILING FEE IS \$61,25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

| 1. Corporation | MENI# /293 | 533 | (5) | | |
|--|---|---|-------------|--------------------------------------|--|
| THE C | IVIC ASSOCIATION OF | IMPERIAL HARE | OR. INC. | | |
| | | | | | I FACILI IOCAN ILANO INIOC INIOC NINOCINI BIONI DALON BARNI ENEMA AND IL DIGITI IDAL |
| Principal Plac | e of Business | Mailing Ad | dress | | |
| , | | • | | | |
| POST OFFICE BOX 868 POST OFFICE BOX 868 BONITA SPRINGS FL 33923 BONITA SPRINGS FL 33923 | | | | | 3. Date Incorporated or Qualified |
| | | | | | 04/11/1974 4. FEI Number Applied For |
| | | | | | 23-7437268 Not Applicable |
| ─ ' | lace of Business | 2a. Mailing | Address | | 5. Certificate of Status Desired S8.75 Additional |
| Suite, Apl. | # Atc | 26 Suite A | pt. #, etc. | | Fee Required 6. Election Campaign Financing \$5.00 May Be |
| 22 | | 27 | | | Trust Fund Contribution Added to Fees |
| City & Stat | e | City & S | State | | 7. Is this nonprofit corporation a homeowners association? |
| 23 Zip | Country | 28 Zip | | Country | Yes No |
| 24 21p | 25 | 29 | - - | 1000mily | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Cu | | | | 10. Name and Address of New Registered Agent |
| | | | | 81 Na | AME NORMAN RINGS |
| SKWIERCZ, JOSEPH JR | | | | 82 Str | reet Address (P.Q. Box Number is Not Acceptable) |
| 26066 PRINCESS LANE | | | | | 26220 Impegial Hasbor 10/16. |
| BONITA | SPRINGS FL 33923 | | | 83 | |
| | | | | 84 City | ty Sant to Santing El 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 | | | | | |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fforida 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 Fforida. 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, Fforida Statutes. | | | | | |
| SIGNATURE | I ordnan | Co. YTA | nas | | 19 march 98 |
| 12. | Signature Aped of printed name of registers | ed agent and title if applicable S AND DIRECTORS | . (NOTE: | Registered Agent sign | nature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | TD (| | DELETE | 1.1 TITLE | PD · McChange Addition |
| NAME | SKWIERCZ, JOSEPH JR | | | 1.2 NAME | Wooman sugs. |
| STREET ADDRESS | 26066 PRINCESS LANE | | | 1.3 STREET ADDRE | |
| CITY-ST-ZIP | BONITA SPRINGS FL | | | 1.4 CITY-ST-ZIP | BONITA SPRINKS 71. 341365 |
| TITLE | PD | l | OELETE | 2.1 TITLE | AL MANNEIL |
| NAME | RICE, FRANK 26099 COUNTELL LANE | | | 2.2 NAME | I I am O Parasect by. |
| STREET ADDRESS CITY-ST-ZIP | BONITA SPRINGS FL | | | 2.3 STREET ADDRE 2. 4 City-St-Zip | 100 1999 |
| TITLE | SD | T | DELETE | 3.1 TITLE | 622 Pastigum Change Addition |
| NAME | PICKRUM, LEE | | | 3.2 NAME | 1293 BARON RD. |
| STREET ADDRESS | 9293 BARON | | | 3.3 STREET ADDRE | ISDATIA SURTUXO TI USTIUS I |
| CITY-ST-ZIP | BONITA SPRINGS FL | | Delete | 3.4. CITY-ST-ZIP | |
| TITLE NAME | d Huntington, Jonathai | | DELETE | 4.1 TITLE 4. 2 NAME | W. Peter Addition |
| STREET ADDRESS | 26070 PRINCESS LANE | • | | 4.2 STREET ADDRE | ا مدهاری ۱ است مقرره |
| CITY-ST-ZIP | BONITA SPRINGS FL | | | 4.4 CITY - ST - ZIP | - 1'0' - 4 - 11 - 11 - 21/12/ |
| TITLE | D | | DELETE | 5.1 TITLE | Change Addition |
| NAME | LEITER, WAYNE | | | 5.2 NAME | 73000 3000 |
| STREET ADDRESS | 26074 PRINCESS LANE | | | 5.3 STREET ADDRE | 91 21 21 |
| CITY-ST-ZIP TITLE | BONITA SPRINGS FL VD | | DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | DOUTH SPRINGS F1. 34135 |
| NAME | RINGS, NORMAN | • | | 6.2 NAME | FONAMAN HUUTINGTON NED \$61.25 |

CITY-ST-ZIP 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 atidress.

SIGNATURE:

STREET ADDRESS

26220 IMPERIAL HARBOR BLVD

BONITA SPRINGS FL

FILED

Mar 24 1998 8:00am

Secretary of State