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May 17, 1999 8:00 am
Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 730107 ✓
1. Corporation Name
SEA EAGLE CLUB, INC.
CONDOMINIUM ASSOCIATION

Principal Place of Business Mailing Address
12155 METRO PKWY
FORT MYERS, FL 33912

3. Date Incorporated or Qualified
1975

4. FEI Number **59-1652472**
Applied For ☐
Not Applicable ☒

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution ☐

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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRESTIGE MANAGEMENT GROUP, INC.
12155 METRO PKWY
FT. MYERS, FLORIDA 33912

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

LIONEL HEDDY

4/25/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **IKE DEGRAFF**
CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FL 34102

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **VP**
STREET ADDRESS **ARMIDA FEDERER**
CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FLORIDA 34102

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **S**
STREET ADDRESS **MARY ELLEN HUTCHINSON**
CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FLORIDA 34102

31 TITLE ☒ Change ☐ Addition
32 NAME **S**
33 STREET ADDRESS **GREGG HUTCHINSON**
34 CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FL 34102

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **POLLY STEINER**
CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FL 34102

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **CATHERINE EATON**
CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FL 34102

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **VINCENT CATELOTTI**
CITY-ST-ZIP **1666 OSPREY AVE.**
NAPLES, FL 34102

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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 address

SIGNATURE: **Ike De Graff**

4/25/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (10/97)