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Secretary of State

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**NONPROFIT
 CORPORATION
 ANNUAL REPORT
 1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 736463

1. Corporation Name

SAN CARLOS PARK CIVIC ASSOCIATION, INC.

Principal Place of Business

17387 MEADOW LAKE CIRCLE
 FT MYERS FL 33912
 US

Mailing Address

17387 MEADOW LAKE CIRCLE
 FT MYERS FL 33912
 US

5 594171 - 90020 - 27



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/26/1976	
Suite, Apt. #, etc. 7229 Myrtle Road		Suite, Apt. #, etc. 7229 Myrtle Road		4. FEI Number 59-1982628	
City & State Fort Myers, FL		City & State Fort Myers, FL		Applied For Not Applicable	
Zip 33912		Zip 33912		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Country US		Country US		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

NICHOLS, TEXAS
 17387 MEADOW LAKE CIRCLE
 FT MYERS, FL
 33912

10. Name and Address of New Registered Agent

81 Name
Ernest Jaergens
 82 Street Address (P.O. Box Number is Not Acceptable)
9164 Mandarin Rd.
 83 City
Fort Myers, FL
 84 Zip Code
33912
 85 State
FL

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

July 14, 1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	P.D.
NAME	NICHOLS, RICHARD	1.2 NAME	Ernest Jaergens
STREET ADDRESS	17387 MEADOW LAKE CIRCLE	1.3 STREET ADDRESS	9164 Mandarin Rd.
CITY-ST-ZIP	FT. MYERS FL 33912	1.4 CITY-ST-ZIP	Fort Myers, FL 33912
TITLE	PD	2.1 TITLE	V.D.
NAME	MARTIN, PHILIP	2.2 NAME	Robert Mercer
STREET ADDRESS	7236 MYRTLE RD	2.3 STREET ADDRESS	19001 Coconut Rd.
CITY-ST-ZIP	FT MYERS, FL 00000	2.4 CITY-ST-ZIP	Fort Myers, FL 33912
TITLE	SD	3.1 TITLE	S.D.
NAME	MERCER, ROBERT	3.2 NAME	Carol Gains
STREET ADDRESS	19001 COCONUT RD	3.3 STREET ADDRESS	9197 Lomelo Road East
CITY-ST-ZIP	FT. MYERS FL 33912	3.4 CITY-ST-ZIP	Fort Myers, FL 33912
TITLE	TD	4.1 TITLE	T.D.
NAME	NICHOLS, TEXAS	4.2 NAME	Ernest Jaergens
STREET ADDRESS	17387 MEADOW LAKE CIRCLE	4.3 STREET ADDRESS	7229 Myrtle Rd.
CITY-ST-ZIP	FT. MYERS FL 33912	4.4 CITY-ST-ZIP	Fort Myers, FL 33912
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ernest Jaergens July 5, 99 (941) 267-8695

CR2E037 (5/99)