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Jan 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 738253 (4)

1. Corporation Name

COMMODORE I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4211 SE 19TH PLACE CAPE CORAL FL 33904 US	4211 SE 19TH PLACE CAPE CORAL FL 33904-5469 US

3. Date Incorporated or Qualified: 03/03/1977
3a. Date of Last Report: 03/11/1996

2. Principal Place of Business — 21: 4211 SE 19TH PL.
2a. Mailing Address — 26:
Suite, Apt. #, etc — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-1868999 ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

COTTRELL, JAMES L.
1633 SE 47TH TERRACE
CAPE CORAL FL 33904

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	PD	☑ DELETE	1.1 TITLE	PD	☐ Change ☑ Addition
NAME	COLTER, HARRY		1.2 NAME	ROBERT FITZGIBBONS	
STREET ADDRESS	4211 SE 19TH PLACE, #1-A		1.3 STREET ADDRESS	4213 SE 19th Pl - # 1G	
CITY-ST-ZIP	CAPE CORAL, FL 00000		1.4 CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE	VD	☑ DELETE	2.1 TITLE	Vice PD	☐ Change ☑ Addition
NAME	SULLIVAN, JOHN		2.2 NAME	JO HARDWICK	
STREET ADDRESS	4211 SE 19TH PLACE, 1-F		2.3 STREET ADDRESS	4002 DEL PRADO	
CITY-ST-ZIP	CAPE CORAL, FL 00000		2.4 CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE	VD	☑ DELETE	3.1 TITLE	VP	☐ Change ☑ Addition
NAME	DANGELO, ANGELO		3.2 NAME	EUGENE MCPHERSON	
STREET ADDRESS	4213 SE 19TH PLACE 2J		3.3 STREET ADDRESS	4213 SE 19th Pl - # 1I	
CITY-ST-ZIP	CAPE CORAL FL		3.4 CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE	SD	☑ DELETE	4.1 TITLE	SD	☐ Change ☑ Addition
NAME	SCHARLAU, BARBARA		4.2 NAME	CHESTER RAMMEL	
STREET ADDRESS	4211 SE 19 PL, APT 1-B		4.3 STREET ADDRESS	4213 SE 19th PL - 1J	
CITY-ST-ZIP	CAPE CORAL, FL 00000		4.4 CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WHITING, BETTY J.		5.2 NAME		
STREET ADDRESS	4211 SE 19TH PLACE #2E		5.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL, FL 00000		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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: Betty J. Whiting Betty J. Whiting 1/3/97 (941) 945-7576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0055160