SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

FILED
Sep 12 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 # 739614 (6)

1. Corporation Name
CAPTAIN'S WALK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
12661 NEW BRITTANY BLVD
FORT MYERS FL 33907
US

Mailing Address
12661 NEW BRITTANY BLVD
FORT MYERS FL 33907
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21)	2a. Mailing Address (26) P.O. Box [illegible]
Suite, Apt. #, etc. (22) P.O. Box [illegible]	Suite, Apt. #, etc. (27)
City & State (23) Sanibel Fl	City & State (28) Sanibel Fl
Zip (24) [illegible] Country (25) US	Zip (29) [illegible] Country (30) US

3. Date Incorporated or Qualified: 07/08/1977
3a. Date of Last Report: 02/16/1996
4. FEI Number: 59-1731692 — 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
STILPHEN, PETER
12661 NEW BRITTANY BLVD
FORT MYERS FL 33907

10. Name and Address of New Registered Agent
81 Name: Anna E. [illegible]
82 Street Address (P.O. Box Number is Not Acceptable): [illegible] Palm Ridge Rd
83 P.O. Box [illegible]
84 City: Sanibel FL
85 Zip Code: [illegible]

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] Anna E. [illegible] — DATE: [illegible]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	SD	☐ DELETE
NAME	HAGAN, FRANK	
STREET ADDRESS	561 PERIWINKLE WAY, #F3	
CITY-ST-ZIP	SANIBEL, FL 00000	
TITLE	D	☒ DELETE
NAME	ATHER, ROGER	
STREET ADDRESS	199 W CENTER ST	
CITY-ST-ZIP	MANCHESTER CT	
TITLE	PD	☐ DELETE
NAME	~~KING~~, PATRICIA KLING	
STREET ADDRESS	101 JAMES ST.	
CITY-ST-ZIP	BLOOMFIELD NJ	
TITLE	VPD	☐ DELETE
NAME	BRITZ, ROBERT	
STREET ADDRESS	40 HILL ROAD	
CITY-ST-ZIP	BELMONT MA	
TITLE	TD	☐ DELETE
NAME	MISCHEL, SIDNEY	
STREET ADDRESS	1896 ALBANY AVENUE	
CITY-ST-ZIP	WEST HARTFORD CT	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Anne Tolley	
1.3 STREET ADDRESS	417 Ridge [illegible]	
1.4 CITY-ST-ZIP	Sherwood [illegible]	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E037 (4/97)

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: SIGNATURE REQUIRED [illegible]