

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # 744810

1. Entity Name
**SAN CARLOS GOLF VILLAS HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**7364 CONSTITUTION CIRCLE SE
FORT MYERS, FL 33912-2781**

Mailing Address
**7364 CONSTITUTION CIRCLE SE
FORT MYERS, FL 33912-2781**



01082008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2211364

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BECKER & POLIAKOFF, P.A.
14241 METROPOLIS AVE.
SUITE 100
FT MYERS, FL 33912-0000**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MILES, WILLIAM
7380 CONSTITUTION CIRCLE SE
FORT MYERS, FL 33967**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
COLBY, SUE
7353 CONSTITUTION CIRCLE
FORT MYERS, FL 33967**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
BOYCE, DIANA
7382 GOLF VILLA DR
FORT MYERS, FL 33912**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
CANNING, WESTER B
7386 GOLF VILLA DR
FORT MYERS, FL 33967**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SCOLES, CLARICE
7373 CONSTITUTION CIR
FORT MYERS, FL 33912**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000784271
01/16/08-80046-024 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Webster B. Canning, Treas. 1/10/08 (239) 482-8493

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #