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FILED
May 19 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 744990 (3)

1. Corporation Name

BEACH GARDEN "D" ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1 LELY BCH.BLVD.
BONITA SPRINGS FL 33923

1 LELY BCH.BLVD.
BONITA SPRINGS FL 33923

3. Date Incorporated or Qualified

11/16/1978

4. FEI Number

65-0399527

Applied For

Not Applicable

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

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COOPER, NANCY
1 LELY BEACH BLVD
BONITA SPRINGS FL 33923

81 Name

TAMELA EADY WISEMAN

82 Street Address (P.O. Box Number is Not Acceptable)

5121 Castello Drive

83

Suite #1

84

City

Naples

FL

85

Zip Code
34103

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

Tamela Eady Wiseman

4-16-98

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 TD FLIER, GUS
STREET ADDRESS 109 ST EUSTACIUS LN
CITY-ST-ZIP BONITA SPRINGS FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME PD LEWALLEN, PHILLIP
STREET ADDRESS 110 DOMINICA LANE
CITY-ST-ZIP BONITA SPRINGS FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME D ASMUS, ROBERT
STREET ADDRESS 211 LELY BEACH BLVD.
CITY-ST-ZIP BONITA SPRINGS FL

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME VPD
3.3 STREET ADDRESS ROBERT BARNES
3.4 CITY-ST-ZIP 103 St. Eustacius Lane
Bonita Springs, Fl. 34134

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 recorder 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:

GUS FLIER

4-16-98 1-941-947-6690

CR2E037 (10/97)