

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90246 019 ****61.25

DOCUMENT # 746872

1. Corporation Name

VICTORIA PARK I PROPERTY OWNERS' ASSOCIATION, IN
C.

Principal Place of Business

9583 SUSSEX STREET
NAPLES FL 34109

Mailing Address

9583 SUSSEX STREET
NAPLES FL 34109



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

04/24/1979

4. FEI Number

59-2156516

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

9. Name and Address of Current Registered Agent

HOPPENSTEDT, RONALD
9583 SUSSEX STREET
NAPLES FL 34109

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD
NAME MILLER, JOSEPH
STREET ADDRESS 240 NOTTINGHAM DR
CITY-ST-ZIP NAPLES FL 34109

TITLE PD
NAME HARGIE, MICHAEL
STREET ADDRESS 9797 BERKSHIRE ST
CITY-ST-ZIP NAPLES FL 34109

TITLE TD
NAME HOPPENSTEDT, RONALD
STREET ADDRESS 9583 SUSSEX STREET
CITY-ST-ZIP NAPLES FL 34109

TITLE SD
NAME ROBITALLE, ROGER
STREET ADDRESS 9757 BERKSHIRE STREET
CITY-ST-ZIP NAPLES FL

TITLE D
NAME ELMER, THOMAS W
STREET ADDRESS 355 HUNTINGTON DR
CITY-ST-ZIP NAPLES FL 34109

TITLE D
NAME HYLEMON, DEBORA
STREET ADDRESS 9596 SUSSEX STREET
CITY-ST-ZIP NAPLES FL 34109

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Ronald Hoppenstedt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/99 941 775-0723
Date Daytime Phone #

CR2E037 (11/98)