FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 10 PM 2:00

DOCUMENT # 757597 (0)

1. Corporation Name
THE COURTYARDS OF CAPE CORAL SOUTH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1500 SW COURTYARDS TERR. CAPE CORAL FL 33914	7181 COLLEGE PARKWAY 42 FT. MYERS FL 33907 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/16/1981	3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-2227631	☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Address: 7181 College Parkway	26 Address:
22 Suite, Apt. #, etc.: Suite 42	27 Suite, Apt. #, etc.:
23 City & State: Fort Myers, FL	28 City & State:
24 Zip: 33907 25 Country: USA	29 Zip: 30 Country:

9. Name and Address of Current Registered Agent

COLDIRON NANCY
3443 CLUBVIEW DR.
N FT. MYERS FL 33917

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 607.0502 and 607.1508, 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 607.0505, 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	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, RONALD L.	1.2 NAME	
STREET ADDRESS	3040 DEL PRADO BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	D ☒ Change ☐ Addition
NAME	KYLE, EUGENE	2.2 NAME	D'Andrea, Robert
STREET ADDRESS	1423 SW COURTYARDS TERRACE	2.3 STREET ADDRESS	3040 Del Prado Blvd.
CITY-ST-ZIP	CAPE CORAL FL	2.4 CITY-ST-ZIP	Cape Coral, FL
TITLE	SD	3.1 TITLE	D ☒ Change ☐ Addition
NAME	STURZA, ANN	3.2 NAME	Jackson, Gidget
STREET ADDRESS	1423 SW COURTYARDS TERRACE	3.3 STREET ADDRESS	1420 SW Courtyards ct. #56
CITY-ST-ZIP	CAPE CORAL FL	3.4 CITY-ST-ZIP	Cape Coral, FL
TITLE	D	4.1 TITLE	D ☒ Change ☐ Addition
NAME	MASSOLO, PHIL	4.2 NAME	MacKey, Larry
STREET ADDRESS	1415 SW COUTYARDS TERRACE	4.3 STREET ADDRESS	3040 Del Prado Blvd.
CITY-ST-ZIP	CAPE CORAL FL	4.4 CITY-ST-ZIP	Cape Coral, FL
TITLE	TD	5.1 TITLE	S/T/D ☒ Change ☐ Addition
NAME	WILLAFORD, EMORY	5.2 NAME	Willa ford, Emory
STREET ADDRESS	1431 SW COURTYARDS TERRACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: E. W. Willaford VP
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

2/1/95
Date

813-
277-1171
Daytime Phone #

0016064