

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # 758457 (6)

1. Corporation Name
THE COURTYARDS OF GOLDEN GATE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address

C/O THE WARNER CORP
~~11983-N-TAMMAM-TR STE 102~~
NAPLES FL 33983
US *886 110th Ave N. #7*

THE WARNER CORP
~~11983-N-TAMMAM-TR STE 102~~
NAPLES FL 33983
US *886 110th Ave N. #7*

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/21/1981** 3a. Date of Last Report **04/01/1994**

4. FEI Number **59-2232258** 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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

WARNER, BRYAN J.
% THE WARNER CORP
~~633 VANDERBILT BCH RD SUITE 4~~
NAPLES FL 33983
886 110th Ave N. #7

10. Name and Address of New Registered Agent

81 Name

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

83

84 City 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 of 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 *BRYAN WARNER* DATE *4-10-95*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOSTER, ANN	1.2 NAME	
STREET ADDRESS	4219 21ST PL SW #42	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FINLEY, JACK	2.2 NAME	Karen Booher
STREET ADDRESS	905 NEW WATERFORD DR #201	2.3 STREET ADDRESS	4259 22nd Ave S.W #43
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	Naples, FL 33999
TITLE	TD	3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARDEN, SANDRA	3.2 NAME	Lewis Kohn
STREET ADDRESS	2175 43RD ST, SW #58	3.3 STREET ADDRESS	4281 22nd Ave SW #79
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	Naples, FL 33999
TITLE	SD PD	4.1 TITLE	President, Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISAACS, ROBERT	4.2 NAME	
STREET ADDRESS	4250 22ND AVE, SW #45	4.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 110.07(3)(k), 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 B17, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert Isaacs* DATE: *4-11-95* (813) 353-1086

ROBERT ISAACS