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Mar 07 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 759065 (6)

1. Corporation Name

COUNTRY PINES OF NORTH FORT MYERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1221 BARRETT RD  
N. FT. MYERS FL 33903  
US

% BENSON'S INC.  
12650 WHITEHALL DR.  
N. FT. MYERS FL 33907-3619  
US

3. Date Incorporated or Qualified  
07/09/1981

3a. Date of Last Report  
04/05/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
59-2267111

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENSON, MARK R.  
C/O BENSON'S INC.  
12650 WHITEHALL DR.  
FT MYERS FL 33907

61 Name

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

63

64 City

FL

65 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD  DELETE  
NAME THOM, ANDREA  
STREET ADDRESS 1220 HALL ROAD #403  
CITY-ST-ZIP N FT. MYERS FL

1.1 TITLE V/D  Change  Addition  
1.2 NAME Lohrbeer, Ellen  
1.3 STREET ADDRESS 1231 Barrett Road, #1001  
1.4 CITY-ST-ZIP North Fort Myers, FL

TITLE STD  DELETE  
NAME ELLIOT, KATHY  
STREET ADDRESS 1200 HALL ROAD #107  
CITY-ST-ZIP NORTH FORT MYERS F

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

TITLE D  DELETE  
NAME LOHRBEER, ELLEN  
STREET ADDRESS 1231 HALL ROAD #1001  
CITY-ST-ZIP NORTH FORT MYERS FL

3.1 TITLE D  Change  Addition  
3.2 NAME Foley, Theresa  
3.3 STREET ADDRESS 1221 Barrett Road, #908  
3.4 CITY-ST-ZIP North Fort Myers, FL

TITLE D  DELETE  
NAME CURREN, JAMES  
STREET ADDRESS 1210 HALL ROAD #201  
CITY-ST-ZIP NORTH FT. MYERS FL

4.1 TITLE D  Change  Addition  
4.2 NAME Roberson, Linda  
4.3 STREET ADDRESS 1211 Barrett Road, #1106  
4.4 CITY-ST-ZIP North Fort Myers, FL

TITLE PD  DELETE  
NAME DOLGIN, MARTIN  
STREET ADDRESS 1201 BARRETT RD, #1208  
CITY-ST-ZIP N. FT. MYERS FL

5.1 TITLE P/D  Change  Addition  
5.2 NAME Thom, Andrea  
5.3 STREET ADDRESS 1220 Hall Road, #403  
5.4 CITY-ST-ZIP North Fort Myers, FL

TITLE D  DELETE  
NAME RITTER, KENNETH  
STREET ADDRESS 1211 BARRETT ROAD #1107  
CITY-ST-ZIP NORTH FORT MYERS FL

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS 700002107777  
6.4 CITY-ST-ZIP -03/07/97--01112--003  
\*\*\*61.25

14. I do 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.

SIGNATURE:

*Andrea Thom*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/97  
Date

(941)277-0718  
Daytime Phone # 005369

CR2E037 (9/96)