FILE NOW: FILING FEE IS \$61.25

CITY-ST-ZIP

SIGNATURE: Thomas

FILED Apr 24 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 765297 (7) EMILY LANE ASSOCIATION, INC. Principal Place of Business Mailing Address **B4 EMILY LANE** 64 EMILY LANE 3, Date Incorporated or Qualified FT MYERS BCH FL 33931 FT MYERS BCH FL 33931 10/05/1982 4. FEI Number Applied For 59-2220834 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired Pepi bone Realty Mont Sery. 21 Fee Required Suite, Apt. #, etc \$5.00 May Be 6. Election Campaign Financing 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes **⋈** № Zip Country Country This corporation owes or has paid the current year Intangible USA Personal Property Tax due June 30, Yes 24 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent GOTTER, RICHARD T. 6100 ESTERO BLVD. 83 FT. MYERS BEACH FL 33931 City MYERS Pursuant to the provisions of Sections 617. office or registered agent, or both, in the Sagent, I am familiar with, and accept the or 2 and 617-1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered cations of, Section 617.0503, Florida Statutes. ni and title il applicable SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE. 1.1 TITLE Change Addition TITLE JAME COTHRAN LONDON, RICHARD NAME 1.2 NAME EMILY LANE **10 EMILY LANE** STREET ADDRESS 1.3 STREET ADDRESS FT MYERS BCH FL MYCR5 CITY+ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 21 TITLE BRIDGE, ALAN 22 NAME NAME **57 EMILY LANE** 2.3 STREET ADDRESS STREET ADDRESS FT MYERS BCH FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE **Addition** TITLE 3.1 TITLE Change KATIN KNIGHT KUMNICK, FRANK NAME 3.2 NAME 35 EMILY LANE STREET ADDRESS 3.3 STREET ADDRESS FT. MYERS BE CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETÉ 4.1 TITLE NAME KENNEDY, JOHN F. 4. 2 NAME 39 EMILY LANE STREET ADDRESS 4.3 STREET ADDRESS FT MYERS BCH FI CITY-ST-AP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE ANITA MINEAR NAME 5.2 NAME 18 EMILY LANE STREET ADDRESS 5.3 STREET ADDRESS 33**9**3/ 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE □ DELETE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 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 receiver or truestee empowered to execute this report as repulired 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.

4-11-98