FILE NOW: FILING FEE IS $61.25

FILED
May 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **765567** **(3)**

1. Corporation Name
CORDOVA VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P. O. BOX 14135 BRADENTON FL 34280	P. O. BOX 14135 BRADENTON FL 34280

3. Date Incorporated or Qualified: 10/26/1982

4. FEI Number: 25-0945921 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FREEDOM PROPERTIES, INC. 410 OLD MAIN STREET BRADENTON FL 34205	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 _____ 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	PD	☑ DELETE	1.1 TITLE	PD – D	☑ Change ☐ Addition
NAME	NOBLE, CATHERINE		1.2 NAME	NEWMAN, WILLIAM	
STREET ADDRESS	3716 59TH STREET DRIVE WEST		1.3 STREET ADDRESS	5903 36TH AVE CIR W	
CITY-ST-ZIP	BRADENTON FL 34209		1.4 CITY-ST-ZIP	BRADENTON, FLA. 34209	
TITLE	TD	☑ DELETE	2.1 TITLE	TREASURER – D	☑ Change ☐ Addition
NAME	NEWMAN, WILLIAM		2.2 NAME	NOBLE, CATHERINE	
STREET ADDRESS	5903 36TH AVE CIR W		2.3 STREET ADDRESS	3716 59TH ST DR W	
CITY-ST-ZIP	BRADENTON FL		2.4 CITY-ST-ZIP	BRADENTON FLA. 34209	
TITLE	VPD	☑ DELETE	3.1 TITLE	VP – D	☐ Change ☑ Addition
NAME	LUKAS, ROSI		3.2 NAME	ST. AMAND, IRENE	
STREET ADDRESS	3618 59TH ST DR W		3.3 STREET ADDRESS	4012 ROYAL PALM DR	
CITY-ST-ZIP	BRADENTON FL		3.4 CITY-ST-ZIP	BRADENTON, FLA 34210	
TITLE	SD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	YOUMANS, ROBIN		4.2 NAME		
STREET ADDRESS	5912 39TH AVE W		4.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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.

SIGNATURE: [signature] (WILLIAM NEWMAN - PRESIDENT) 4/16/98 941-794-4747