FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

765625

(9)

VILLANOVA COLONNADE CONDOMINIUM, SECTION II, ASS OCIATION, INC.

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Principal Place of Business Mailing Address									- I IDDIN JOUIN EWEN DINA BILLE LIBON DIN DIDIL DIDIL DIDIL GERI DIGN GIOLI FEDI -					
27657 OLD 41 P O BOX 2507 BONITA SPRINGS FL 33959-2507 BONITA SPRINGS FL 33959-2507						34133-2507								
									 Date Incorporated or Qualit 11/02/1982 	lied 3	a. Dat	te of Last Re 03/15/19	96	
2. Principal Pi	lace of Busin	oss	2a. 26	2a. Mailing Address					4. FEI Number Applied For S9-2335819 Not Applied be					
Suite, Apt	#. etc.	20	Suite, Apt. #, etc.					60.7E						
22				27					5. Certificate of Status Desired	d [J ·	Fee Re		
City & State				City & State					Election Campaign Financial Trust Fund Contribution	ng [ו	\$5.00 Added to		
Zip Country				Zip Country			,							
24					30	5]			8. This corporation has liability for intangible tay under s. 199.032, Florida Statutes					
9. Name and Address of Current Registered Agent						10. Nr			10. Name and Address of Ne	w Regist	ered #	lgent		
						81	Name							
LUCKEY, FLOYD JR.						62	Street	Address	s (P.O. Box Number is Not Aco	eptable)				
5164 BONITA BEACH RD SW BONITA SPRINGS FL 33923						83								
						84	City				·	85 Zip (^nde	
						04	City				FL	85 Zip C	Jude	
11, Pursuant t office or re agent. Lar	to the provisi egistered ag m familiar wi	ions of Sections 617.0 ent, or both, in the St th, and accept the ob	0502 and 6 ate of Florid oligations of	17.1508, Florida Stal la. Such change wa , Section 617.0503,	tutes, the is author Florida S	e abovi ized by Statute:	e-named the corps s.	corpora poration	ation submits this statement for 's board of directors. I hereby t	the purp accept th	ose of e appo	changing its ointment as	s registered registered	
SIGNATURE _											<u></u>			
	Signature, typed	or printed name of registered					ent signature	e required w	when reinstaling)		OATE C AND	DIRECTOR	C IN 12	
12.	PD	OFFICERS	AND DIREC	DELETE		.1 TITLE		T	ADDITIONS/CHANGES TO	JFFICER		Change	Addition	
NAME		ZZA, SAL		C DEFEIR		.2 NAME						Change		
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CHY-ST-ZIP		SPRINGS FL	•			.4 City-5		}	:			1		
TITLE	VD	0,11110012		☐ D€LETE		1 TITLE	21 - Cit	 				Change	Addition	
NAME		Y, FŁOYD JR.		_		2 NAME						_ `	_	
STREET ADDRESS		ONITA BEACH RD	SW		2	.3 STAEET	ADDRESS	}						
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CITY - ST - ZIP	BONITA	SPGS. FL			3	4. CITY-	ST-ZIP			<u>.</u>				
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NAME					4	I. 2 NAME						÷		
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CITY - ST - ZiP		······				I.4 CITY - S	ST-ZIP	ļ				T 65	11.440	
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NAME						3.2 NAME								
STREET ADORESS							ADDRESS							
CITY-S1-ZIP				1 DELETE		4 CITY - S	ST-ZIP	 				Change	Addition	
TITLE	i			DELETE	•	S.1 TITLE		[•	ு வளர்	☐ vonition	
NAME					1	S.2 NAME								
STREET ADDRESS					6	o.3 STREET	T ADDRESS							

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 of changed or on an attachment with an address.

SIGNATURE:

AND THED DAY ANTED WALE OF SIGNING OFFICER OR DIRECTOR

2/21/97

Daytime Phone # 0060297

FILED

Mar 04 1997 8:00am

Secretary of State

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