

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **H18318** (6)
1. Corporation Name
ANGLER'S PARADISE RESIDENT'S ASSOCIATION, INC.



Principal Place of Business 27711 WINDSOR RD. S.W. L-80 BONITA SPRINGS FL 33923	Mailing Address 27711 WINDSOR RD. S.W. L-80 BONITA SPRINGS FL 34134-4148
---	--

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/27/1984	3a. Date of Last Report 02/13/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2407633		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

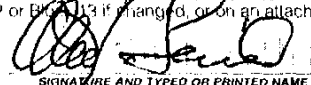
9. Name and Address of Current Registered Agent BRYANT, EDWARD R JR. 3301 DAVIS BLVD. NAPLES FL 33940		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
		FL	85 Zip Code

11. Pursuant to the provisions of Sections 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, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	SPEARS, ROBERT	1.2 NAME	KINSTLE, CARL
STREET ADDRESS	27711 WINDSOR RD. LOT 72	1.3 STREET ADDRESS	27711 WINDSOR RD LOT 54
CITY-ST-ZIP	BONITA SPRINGS FL	1.4 CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	P ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LIND, OTTE J	2.2 NAME	
STREET ADDRESS	27711 WINDSOR RD SW L-132	2.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	2.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	ESPOSITO, PAT	3.2 NAME	
STREET ADDRESS	27711 WINDSOR RD SW L-35	3.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 33923	3.4 CITY-ST-ZIP	
TITLE	TD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MORSE, MALCOLM	4.2 NAME	
STREET ADDRESS	27711 WINDSOR RD. L-12	4.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPGS FL 33923	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	KENNEDY, ANN	5.2 NAME	
STREET ADDRESS	27711 WINDSOR RD. L-22	5.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 33923	5.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, HARRY	6.2 NAME	
STREET ADDRESS	27711 WINDSOR ROAD LOT 134	6.3 STREET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL	6.4 CITY-ST-ZIP	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **OTTO J. Lind** 2-25-97 941-992 0238
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #