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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	Mailing Address
27711 WINDSOR RD. S.W. L-60 BONITA SPRINGS FL 33923	27711 WINDSOR RD. S.W. L-60 BONITA SPRINGS FL 34134-4148

3. Date Incorporated or Qualified: 08/27/1984
3a. Date of Last Report: 02/13/1996

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

4. FEI Number: 59-2407633 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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 _____ 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	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	27711WINDSOR ROAD LOT 134		6.3 STREET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS FL		6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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 #

0416074