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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H57312** (1)

1. Corporation Name

GOLDEN-WEST PROPERTIES EXCHANGE INC.



Principal Place of Business

Mailing Address

**15248 SO U.S. 41 STE 900
FT MYERS FL 33908**

**15248 SO U.S. 41 STE 900
FT MYERS FL 33908**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

**FORGIONE, RAYMOND N.
15248 S US 41
SUITE #900
FT MYERS FL 33908**

10. Name and Address of New Registered Agent

81 Name **JUDITH LIPINSKI**
82 Street Address (P.O. Box Number is Not Acceptable)
15248 S US 41
83 **SUITE 900**
84 City **FT. MYERS** FL 85 Zip Code **33908**

11. Pursuant to the provisions of Sections 607 (0502) and 607.1503, 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 607.0403, Florida Statutes.

SIGNATURE

x Judith M. Lipinski

x 1-31-96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
PTD	FORGIONE, RAYMOND N.	15248 S US 41, STE 900	FT. MYERS FL	☒
VD	SMITH, RUSSELL	15248 S US 41, SUITE 900	FT. MYERS FL	☒
				☐
				☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE	Change	Addition
P	JUDITH LIPINSKI	15248 S US 41, STE 900	FT. MYERS, FL 33908	☒	☒	☐
T/S	ROGER HUNT	15248 S US 41, STE 900	FT. MYERS, FL 33908	☐	☒	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

x Judith M. Lipinski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

x 1-31-96 810 939-2288

CR2E034 (12/95)