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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N08055 (8)

FILED						
Jan 30 1998 8:00am						
Secretary of State						

THE FORUM CLUB OF SOUTHWEST FLORIDA, INC.						
Principal Plac	e of Business	Mailing Address	**		BIOIL BEOLD OIN!	
C/O_JOANNE RAINEY 788-WILLOW BROOK DR #508 NAPLES FL 93963+		C/O JOANNE RAINEY 788 WILLOW BROOK DR. #500 POBOX 1332. NAPLES FL 20000 3410 G		3. Date Incorporated or Qualified 03/08/1985 4. FEI Number 59-2492184	Applied For Not Applicable	
2. Principal Place of Business 2a. Mailing Address			Director	5. Certificate of Status Desired	\$8.75 Additional	
Suite Apt # etc.			<u> </u>	6. Election Campaign Financing	Fee Required \$5.00 May Be	
121 1036 Franklyniteman		27 PO BOX 1332		Trust Fund Contribution	Added to Fees	
City & Stat	168.FL 34103	28 VI & State & FL		7. Is this nonprofit corporation a homeow Yes	ners association?	
Zip 24	Country S	29 3HD6 30	Country U.S.	This corporation owes or has pald the Personal Property Tax due June 30.	current year Intangible NA	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	ed Agent	
81 Nar				samme Soungaterrou		
RAINEY; JOANNE SOM SOFUM JOUWAS 700 WILLOW BROOK DR. 1036 Frank Winterwall			82 Street Addre	Z C.O. BENTUNCK AN METERNALIN		
	SFL 34108 34172	MIK MALLINAMA	83	00 \$ 400\$ (15 00) alou- 6-0-		
	2403		84 City \	[0.1/1.cm]	85 ZB/Cbds/0	
	AND		1 1 1 1	<i>IUDUS</i> F	L 741/12-	
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 any accept the obligations of Section 617.0503, Florida Statutes.						
1/ LL R [\] R						
SIGNATURE .	Signature, typed or printing in his of registered agen	t and title if applicable. (NOTE: R	LO registered Agent signature require	ed when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE	1,1 TITLE		☐ Change ☐ Addition	
NAME	HARVEY, JUDGE E. JAMES		1.2 NAME			
STREET ADDRESS	3500 GULF SHORE BLVD N		1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL PDE	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition	
NAME	GIRARDIN, CAROL		2.2 NAME			
STREET ADDRESS	693 HICKORY RD		2.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		2. 4 CITY-ST-ZIP			
TITLE	VPD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME	INGRAM, THOMAS		3.2 NAME			
STREET ADDRESS	712 NATHAN HALE DR		3.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		3.4. CITY-ST-ZIP			
TITLE	SD	L. DELETE	4,1 TITLE		Change Addition	
NAME	CARROLL, JAMES	i	4. 2 NAME			
STREET ADDRESS	8430 ABBINGTON CIR		4.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL	DELETE	4.4 CITY-ST-ZIP		Change Addition	
TITLE	TD CLUMO LINDA	TT DETELE	5.1 TITLE		C Ondrige C Addition	
NAME CTDEET ADODESS	FLEWELLING, LINDA		5.2 NAME			
STREET ADDRESS	777 RIMERA DR NAPLES FL		5.3 STREET ADDRESS			
TITLE	FDD	▶ L DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition	
NAME	EDD RAINEY, JOANNE > SON' 788 WILLOW BROOK DRY (D) NAPI ES FI	soterva Traine	6.2 NAME			
STREET ADDRESS	788 WILLOW RECOK DEL	30 Emplishations	GE/STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL	OR LAWIK MAILANAI	6.4 CITY-ST-ZIP			
				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: