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May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # N08773 (6)

1. Corporation Name
COUNTRY CLUB ESTATES HOMEOWNERS OF VENICE, INC.

Principal Place of Business	Mailing Address
C/O WILLIAM R. KORP 333 TAMIAMI TRL. VENICE FL 34285	C/O WILLIAM R. KORP 333 TAMIAMI TRL. VENICE FL 34285

3. Date Incorporated or Qualified: 04/18/1985

4. FEI Number: 59-2653265 ☐ Applied For ☐ Not Applicable

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

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

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KORP, WILLIAM R. 333 TAMIAMI TRL. VENICE FL 34285	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 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, and accept the obligations of, Section 617.0503, 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	PD	☒ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	SMITH, ARTHUR E		1.2 NAME	SIMMONS, KENNETH	
STREET ADDRESS	808 TURF		1.3 STREET ADDRESS	860 GREEN CIRCLE	
CITY-ST-ZIP	VENICE FL		1.4 CITY-ST-ZIP	VENICE, FL 34285	
TITLE	SD	☒ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	LANEY, BARBARA M		2.2 NAME	BECHTER, ROBERT	
STREET ADDRESS	808 CARE FREE		2.3 STREET ADDRESS	814 S WATERWAY	
CITY-ST-ZIP	VENICE FL		2.4 CITY-ST-ZIP	VENICE, FL 34285	
TITLE	VP	☒ DELETE	3.1 TITLE	~~D~~ TD	☐ Change ☒ Addition
NAME	SIMMONS, KENNETH		3.2 NAME	NICHOLS, ISABELLE	
STREET ADDRESS	860 GREEN CIRCLE		3.3 STREET ADDRESS	825 CAREFREE	
CITY-ST-ZIP	VENICE FL		3.4 CITY-ST-ZIP	VENICE, FL 34285	
TITLE	D	☐ DELETE	4.1 TITLE	SD	☐ Change ☒ Addition
NAME	PRYOR, J B		4.2 NAME	NICHOLS, FRED	
STREET ADDRESS	701 S WATERWAY		4.3 STREET ADDRESS	735 S WATERWAY	
CITY-ST-ZIP	VENICE FL		4.4 CITY-ST-ZIP	VENICE, FL 34285	
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	WELCH, ARTHUR		5.2 NAME	HARRIS, BOB	
STREET ADDRESS	804 CAREFREE		5.3 STREET ADDRESS	656 GREEN CIRCLE	
CITY-ST-ZIP	VENICE FL		5.4 CITY-ST-ZIP	VENICE, FL 34285	
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	KAY, DILWORTH		6.2 NAME	WINEGAR, FRAN	
STREET ADDRESS	704 GREEN CIRCLE		6.3 STREET ADDRESS	750 WATERWAY	
CITY-ST-ZIP	VENICE FL		6.4 CITY-ST-ZIP	VENICE, FL 34285	

CR2E037 (10/97)

14. I 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 if changed, or on an attachment with an address.

SIGNATURE: [signature] KENNETH SIMMONS 3/15/98 941-484-9112