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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
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DOCUMENT # **N17459** (1)

1. Corporation Name

REGENT PARK MASTER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**4800 ENTERPRISE AVE.
STE A
NAPLES FL 33942
US**

**4800 ENTERPRISE AVE
STE A
NAPLES FL 33942
US**



3. Date Incorporated or Qualified

10/22/1986

4. FEI Number

59-2756989

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WRIGHT, RUSSELL
4600 ENTERPRISE AVE STE A
NAPLES FL 33962**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE

NAME **BROOKS, ERNEST**
STREET ADDRESS **10370 REGENT CIRCLE**
CITY-ST-ZIP **NAPLES FL**

TITLE **PD** ☒ DELETE

NAME **WISEMAN, STEVE**
STREET ADDRESS **10691 REGENT CIRCLE**
CITY-ST-ZIP **NAPLES FL**

TITLE **D** ☐ DELETE

NAME **ADAM, MACKEY**
STREET ADDRESS **3305 ERICK LAKE DR**
CITY-ST-ZIP **NAPLES FL**

TITLE **VPD** ☐ DELETE

NAME **GOLD, GERRIE**
STREET ADDRESS **10906 REGENT CIRCLE**
CITY-ST-ZIP **NAPLES FL**

TITLE **TD** ☒ DELETE

NAME **BUTLER, HELEN**
STREET ADDRESS **10736 WILLIAM COURT**
CITY-ST-ZIP **NAPLES FL**

TITLE **D** ☐ DELETE

NAME **MCGOWEN, KEVIN**
STREET ADDRESS **10580 REGENT CIRCLE**
CITY-ST-ZIP **NAPLES FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PD
Bill Brooks
10141 Sailfish Lane
Naples, FL 34109

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

SD
Molly Weber
10620 Regent Circle
Naples, FL 34109

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

VPD
Adam Mackey
3305 Erick Lake Drive
Naples, FL 34109

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TD
Gerrie Gold
10906 Regent Circle
Naples, FL 34109

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

D
Jean Bartley
10810 Queen Anno Lane
Naples, FL 34109

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D
Kevin McGowan
10580 Regent Circle
Naples, FL 34109

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:

Kevin McGowan

Kevin McGowan

5-1-98 434-6100

CR2E037 (10/97)