

FILE NOW: FILING FEE IS \$61.25

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Apr 24 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 # N23971 (7)
1. Corporation Name
SNUG HARBOR VILLAGE HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business 7800 U.S. #1 MICCO FL 32976	Mailing Address 7800 U.S. #1 MICCO FL 32976
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 4445 N A1A
22 City & State	27 Suite 150A
23 City & State	28 Vero Beach FL
24 Zip	29 32963
25 Country	30 Indian River

3. Date Incorporated or Qualified 12/18/1987
4. FEI Number 59-2977602
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
DORADO, VICTORIA
4039 SNOWY EGRET DR
MELBOURNE FL 32904

10. Name and Address of New Registered Agent
81 Name Camco Services Inc.
82 Street Address (P.O. Box Number is Not Acceptable) 4445 N A1A
83 Suite 150A
84 City Vero Beach FL 85 Zip Code 32963

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 *Paul Paterotini* 4/16/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	P GOULD, PAUL L
NAME	328 SWANTON ROAD
STREET ADDRESS	DAVENPORT CA 95017
CITY-ST-ZIP	
TITLE	VD ROTH, ROBERT
NAME	172 DEAN RD.
STREET ADDRESS	BROOKLINE MA
CITY-ST-ZIP	
TITLE	VTD DORADO, VICTORIA
NAME	4039 SNOWY EGRET DR
STREET ADDRESS	MELBOURNE FL
CITY-ST-ZIP	
TITLE	SD ROSKOS, MICHAEL
NAME	1381 KNOLLWOOD ROAD N.E.
STREET ADDRESS	PALM BAY FL 32907
CITY-ST-ZIP	
TITLE	D PASTOR, MADLYN
NAME	7545 AGAWAM RD
STREET ADDRESS	MICCO FL
CITY-ST-ZIP	
TITLE	D MAHONEY, RONALD
NAME	7525 BLACKHAWK RD
STREET ADDRESS	MICCO FL 32976
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD HENNESSEY, JAMES
1.2 NAME	5610 Buckhorn Place
1.3 STREET ADDRESS	Micco, FL 32976
1.4 CITY-ST-ZIP	
2.1 TITLE	VD MAHONEY, RONALD
2.2 NAME	7525 Blackhawk Road
2.3 STREET ADDRESS	Micco, FL 32976
2.4 CITY-ST-ZIP	
3.1 TITLE	TD JULIAN, ED
3.2 NAME	7540 Blackhawk Road
3.3 STREET ADDRESS	Micco, FL 32976
3.4 CITY-ST-ZIP	
4.1 TITLE	SD THOMPSON, JOHN
4.2 NAME	7560 Agawam Road
4.3 STREET ADDRESS	Micco, FL 32976
4.4 CITY-ST-ZIP	
5.1 TITLE	D LEGERE, JOSEPH
5.2 NAME	7460 Blackhawk Road
5.3 STREET ADDRESS	Micco, FL 32976
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *Paul Paterotini* REQUIRED

4/16/98

CR2E037 (10/97)