FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N24600

(1)

		OR COMMONS										
Principal Place of Business Malling Address * R & P MANAGEMENT ASSOCIATES. INC 265 AIRPORT ROAD. SOUTH **R & P MANAGEMENT ASSOCIATES. INC 265 AIRPORT ROAD. SOUTH									Date Incorporated or Qualified 02/01/1988			
NAPLES FL 33	942		NAPLES I	FL 33942				4.	FEI Number		TApp	lied For
1								Ĭ	65-0070295			Applicable
2. Principal P	lace of Busin	ess	2a. Mailir 26	2a. Mailing Address 26				5.	. Certificate of Status Desired	7	75 Ad e Req	iditional uired
Suite, Apt.	#, etc.		⊢ —	Suite, Apt. #, etc.				6.	Election Campaign Financing)O Ma	
22			27					_	Trust Fund Contribution		ed to F	
City & State	e 		28					7. Is this nonprofit corporation a homeowners association? Yes \(\subseteq \text{No} \)				
Zip	Zip Country			Zip		Country			This corporation owes or has paid the			
24				29 30				<u> </u>	Personal Property Tax due June 30.	Yes Yes	<u> </u>	No
9. Name and Address of Current Registered Agent							Name	10.	Name and Address of New Register	ed Agent		
					8	וי	Name					
R & P MANAGEMENT ASSOCIATES 265 AIRPORT ROAD					6:	62 Street Addre			P.O. Box Number is Not Acceptable)			
NAPLES FL 33942						83						
						84 City				85	Zip Co	nde
					٦	Ì	•		F	-L	•	
SIGNATURE		or printed name of registered	agent and title if applic	able (NO	TE Registered A		it signature require	d wher		TE.		
12.		OFFICERS A	AND DIRECTORS		13.				ADDITIONS/CHANGES TO OFFICERS A			
TITLE	DP			DELETE	1,1 TITLE					☐ Char	108	☐ Addition
NAME		BERG, DON			1.2 NAMI		İ					
STREET ADDRESS	MAN CA CI						1.3 STREET ADDRESS					
CITY-ST-ZIP		<u> </u>		DELETE	1.4 CITY	_	-ZIP			Char		☐ Addition
TITLE	VD VCE I	SALDU.		Dereit	2.1 TITLE					LJ CIM	ige	L AUGILION
NAME STREET ADDRESS	PRICE, F	OVETRY CT #830					2.2 NAME 2.3 STREET ADDRESS					
CITY-ST-ZIP	NAPLES						2. 4 CITY-ST-ZIP					
TITLE	TD	16		DELETE	3.1 TITLE		1-211			Char	108	Addition
NAME	· · ·	GEORGE		_	3.2 NAME		İ			_	•	
STREET ADDRESS		VENTRY CT #710			3.3 STREE		UDDRESS					
CITY-ST-ZIP	NAPLES				3.4. CITY		·					
TITLE	SD.			DELETE	4.1 TITLE					Char	nge	Addition
NAME	BECK, E	DWARD			4.2 NAM	E						
STREET ADDRESS	7240 CC	VENTRY CT #330			4.3 STREE	ET A	IDDRESS					1
CITY-ST-ZIP	Y-ST-ZIP NAPLES FL			4.4 CIT			- ZIP					
TITLE	D	-		DELETE	5.1 TITLE	:				Char	ığe	Addition
NAME		MORROW			5.2 NAME	E						
STREET ADDRESS 7300 COVENTRY CT				5.3 STR			uddress					
CITY-ST-ZIP	NAPLES	FL			5.4 CITY-	·st-	- ZIP					
TITLE	D			DELETE	6.1 TITLE		T			☐ Char	ige	Addition
NAME	PFAFF, I	EUGENE			6.2 NAME	Ę						

14. I hereby certify that the information supplied with this filling 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

7260 COVENTRY CT #420

NAPLES FL

Nav C. Vrychle D

4-6-98 94-643-3353

FILED

Apr 24 1998 8:00am

Secretary of State

E037 (10/97)