FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

FILED
May 28 1998 8:00am
Secretary of State

DOCUMENT # N25225 (6)

1. Corporation Name

NAPLES WINTERPARK VIII, INC.

Principal Place of Business	Mailing Address
R & P MANAGEMENT, INC. 265 S AIRPORT RD NAPLES FL 33942 US	R & P MANAGEMENT, INC. 265 S AIRPORT RD NAPLES FL 33942 US

3. Date Incorporated or Qualified: 03/04/1988

4. FEI Number: 65-0030981 ☐ Applied For ☐ Not Applicable

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

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 34104 Country 25	Zip 29 34104 Country 30

9. Name and Address of Current Registered Agent

R & P MANAGEMENT ASSOCIATES
265 AIRPORT RD S
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code 34104

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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	☒ DELETE	1.1 TITLE	P	☒ Change ☒ Addition
NAME	FREELS, PEGGY		1.2 NAME		
STREET ADDRESS	4240 JACK FROST CT., #5		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		
TITLE	PD	☒ DELETE	2.1 TITLE	SD	☒ Change ☒ Addition
NAME	RALPH, GARY A		2.2 NAME		
STREET ADDRESS	4230 JACK FROST CT 1		2.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	3.1 TITLE	D	☒ Change ☒ Addition
NAME	REYNOLDS, MARNA		3.2 NAME		
STREET ADDRESS	1167 FOXFIRE LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

1 JANETTE HOLLIDA
4270 JACK FROST Ct. #6
NAPLES, FL 34112

2 RETA POLING
4240 JACK FROST Ct. #1
NAPLES, FL 34112

3 HELEN CONCEPTION
4270 JACK FROST Ct. 5
NAPLES, FL 34112

2 more T's or D's

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: Janette L. Holliday 5-6-98 643-3353