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NONPR	OFIT
CORPOR	ATION
ANNUAL F	REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

N27807

MONTEREY SINGLE FAMILY NEIGHBORHOOD ASSOCIATION. INC. Principal Place of Business Mailing Address %CHRIS BUNDSCHU %CHRIS BUNDSCHU 1044 CASTELLO DRIVE #206 1044 CASTELLO DRIVE #206 FT. MYERS FL 33940 FT. MYERS FL 33940 3. Date Incorporated or Qualified 3a. Date of Last Report 08/09/1988 03/29/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 21 1044 Castello Drive 26 65-0081829 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suite #206 Fee Required City & State City & State Naples, Florida 6. Election Campaign Financing \$5.00 May Be Naples, Florida 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 33940 24 33940 25 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Southwest Property Management Corp BUNDSCHU, CHRIS 82 1044 Castello Drive #206 5900 ENTERPRISE PARKWAY FT. MYERS FL 33905 83 Naples, Florida 33940 84 Citv 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 Milliams) STEPHEN E. W. 1119ms (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. TITLE -PD DELETE 1.1 Tible VD Change Addition NAME **BUNDSCHU, CHRIS** 1.2 NAME STREET ADDRESS 5900 ENTERPRISE PARKWAY 1.3 STREET ADDRESS FORT MYERS FL CITY-ST-ZIP 1.4 CITY - ST - 7IP TITLE DELETE -STD-SD 2.1 TITLE Change ☐ Addition NAME BUNDSCHU, GAYLE 2.2 NAME STREET ADDRESS 5900 ENTERPRISE PARKWAY 2 3 STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 2 4 CITY-ST-ZIP -VD-TITLE DELETE 3.1 TITLE Change Addition NAME SCOTT, JEFF 3.2 NAME STREET ADDRESS 2123 LAGUNA WAY 3.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE TD Addition Change NAME MILLER, T. WHERRETT Steven Benson 4. 2 NAME STREET ADDRESS 7470 MISSION DRIVE 4.3 STREET ADDRESS \$020 San Simeon Way CITY-ST-ZIP NAPLES FL Naples, Florida 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change ☐ Addition NAME KANE, PAUL, T 5.2 NAME STREET ADDRESS 7470 MISSION DR 5.3 STREET ADDRESS NAPLES FL CITY - ST- ZIP 5.4 CITY-S1-ZIP TITLE DELETE PD 61 TITLE Addition NAME LEVENTHAL, LAWRENCE 62 NAME STREET ADDRESS 2097 LAGUNA WAY 6.3 STREET ADDRESS NAPLES FL CiTY-ST-7/P 6.4 CHY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this angual 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 AND TYPED OR PHINTS OFFICER OR DIRECTOR

3/21/96 941-693-1000

(12/95)

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