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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90272 035 \*\*\*\*61.25

0062904

**DOCUMENT # N27809**

1. Corporation Name

**MONTEREY MASTER OWNERS' ASSOCIATION, INC.**

Principal Place of Business

SOUTHWEST PORPRTY MANAGEMENT  
1044 CASTELLO DRIVE #206  
NAPLES FL 33940  
US

Mailing Address

SOUTHWEST PROPERTY MANAGEMENT  
1044 CASTELLO DRIVE #206  
NAPLES FL 34103  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

3. Date Incorporated or Qualified

08/09/1988

4. FEI Number  
65-0068523

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

9. Name and Address of Current Registered Agent

SOUTHWEST PORPRTY MANAGEMENT COPR  
1044 CASTELLO DRIVE SUITE 206  
NAPLES FL 34103

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

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 ☐ DELETE  
NAME ~~JOE~~  
STREET ADDRESS ~~7520 SAN MIGUEL WAY~~  
CITY-ST-ZIP ~~NAPLES FL 34109~~

TITLE ☐ DELETE  
NAME ~~9B~~  
STREET ADDRESS ~~BENSON, LORRI~~  
CITY-ST-ZIP ~~8820 SAN SIMEON WAY~~  
~~NAPLES FL 34109~~

TITLE ☐ DELETE  
NAME ~~VPD~~  
STREET ADDRESS ~~8601 JEFF~~  
CITY-ST-ZIP ~~7699 SANTA MARGHERITA WAY~~  
~~NAPLES FL~~

TITLE ☐ DELETE  
NAME ~~D~~  
STREET ADDRESS ~~SPITZER, ED~~  
CITY-ST-ZIP ~~8039 SAN VISTA CIR~~  
~~NAPLES FL~~

TITLE ☐ DELETE  
NAME ~~PD~~  
STREET ADDRESS ~~BENCIN, JIM~~  
CITY-ST-ZIP ~~1720 SAN BERNADINO WAY~~  
~~NAPLES FL~~

TITLE ☐ DELETE  
NAME ~~D~~  
STREET ADDRESS ~~FAWKES, GAYLE~~  
CITY-ST-ZIP ~~8000 VERA CRUZ WAY~~  
~~NAPLES FL 34109~~

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME ~~PD~~  
1.3 STREET ADDRESS ~~Day, Tyler~~  
1.4 CITY-ST-ZIP ~~7998 Beaumont Ct.~~  
~~Naples, FL~~

2.1 TITLE ☒ Change ☒ Addition  
2.2 NAME ~~20~~  
2.3 STREET ADDRESS ~~CYNTHIA BIRK~~  
2.4 CITY-ST-ZIP ~~8114 COSTA BRAVA COURT~~  
~~NAPLES, FL 34109~~

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME ~~Kant, Ed~~  
3.3 STREET ADDRESS ~~1910 Mission Dr.~~  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME ~~TD~~  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME ~~Ferenasi'k, Emery~~  
6.3 STREET ADDRESS ~~7514 San Gabriel Ln.~~  
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, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99 261-3440

CR2E037 (11/98)