

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

05 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N28073** (7)
1. Corporation Name
MCGREGOR PARK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
**1901 MCGREGOR PARK CIRCLE
FORT MYERS FL 33908
US** **1901 MCGREGOR PARK CIRCLE
FT. MYERS FL 33908
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/26/1988** 3a. Date of Last Report **03/25/1994**
4. FEI Number **65-0071042** 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address **2510**
21 **804 McGregor Park Cir** 26 **McGregor Park Cir.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 **Fort Myers, FL** 28 **Fort Myers, FL**
Zip Country Zip Country
24 **33908** 25 **lee** 29 **33908** 30 **Lee**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GRAY, A. FRED
9880 DEERFOOT DRIVE S.W.
FORT MYERS FL 33919**

81 Name **Marcella J. Renfer**
82 Street Address (P.O. Box Number is Not Acceptable)
1903 McGregor Park Cir.
83
84 City **Fort Myers** FL 85 Zip Code **33908**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Marcella J. Renfer* **Marcella J. Renfer, Vice Pres-Asst Secy 03/11/95**
Signature, typed or printed name of registered agent or officer if necessary DATE
(NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **GRAY, A. FRED**
STREET ADDRESS **9880 DEERFOOT DR. SW**
CITY-ST-ZIP **FT. MYERS FL**

TITLE **STD**
NAME **GRAY, JACKIE N.**
STREET ADDRESS **9880 DEERFOOT DR. SW**
CITY-ST-ZIP **FT. MYERS FL**

TITLE **VD**
NAME **LEHNE, THOMAS**
STREET ADDRESS **9880 DEERFOOT DR. SW**
CITY-ST-ZIP **FT. MYERS FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President D** ☒ Change ☐ Addition
1.2 NAME **William G. Brose**
1.3 STREET ADDRESS **804 McGregor Park Cir.**
1.4 CITY-ST-ZIP **Fort Myers, FL 33908**

2.1 TITLE **Vice Pres.-Asst. Secy D** ☒ Change ☐ Addition
2.2 NAME **Marcella J. Renfer**
2.3 STREET ADDRESS **1903 McGregor Park Cir.**
2.4 CITY-ST-ZIP **Fort Myers, FL 33908**

3.1 TITLE **Treasurer D** ☒ Change ☐ Addition
3.2 NAME **Michael B. Hoyman**
3.3 STREET ADDRESS **2203 McGregor Park Cir.**
3.4 CITY-ST-ZIP **Fort Myers, FL 33908**

4.1 TITLE **Secretary D** ☒ Change ☐ Addition
4.2 NAME **Jay N. Mossman**
4.3 STREET ADDRESS **2502 McGregor Park Cir.**
4.4 CITY-ST-ZIP **Fort Myers, FL 33908**

5.1 TITLE **Board Member D** ☒ Change ☐ Addition
5.2 NAME **Lise Fletcher**
5.3 STREET ADDRESS **2101 McGregor Park Cir.**
5.4 CITY-ST-ZIP **Fort Myers, FL 33908**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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 118.07(3)(b), 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 *Jay N. Mossman* **Jay N. Mossman, Secretary** 03/11/95
Signature, typed or printed name of signing officer or director Date