

FILE NOW: FILING FEE IS \$61.25

FILED

May 09 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N30422 (2)

1. Corporation Name

GLENEAGLES IV CONDOMINIUM ASSOCIATION OF NAPLES, INC.

Principal Place of Business

Mailing Address

267 DEERWOOD CIR. #A
NAPLES FL 34113

267 DEERWOOD CIR. #A
NAPLES FL 34113-8991



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

3. Date Incorporated or Qualified
01/30/1989

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0097328

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DE PEW, THERESA
269 DEERWOOD CIR.
#4
NAPLES FL 34113

81 Name JACK KEMPER
82 Street Address (P.O. Box Number is Not Acceptable) 269 Deerwood Cir #3
83
84 City NAPLES, FL 85 Zip Code 34113

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 John Kemper

4-25-96

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 VD ☐ DELETE
NAME PERICO, ANTHONY
STREET ADDRESS 265 DEERWOOD CIR #5
CITY-ST-ZIP NAPLES FL

1.1 TITLE Sec. 1 Dir. ☐ Change ☒ Addition
1.2 NAME GAIL THURSTON
1.3 STREET ADDRESS 269 Deerwood Cir #12
1.4 CITY-ST-ZIP NAPLES, FL

TITLE VD ☐ DELETE
NAME TURILLI, DUILIO
STREET ADDRESS 265 DEERWOOD CIR #2
CITY-ST-ZIP NAPLES FL

2.1 TITLE TREAS / Dir. ☐ Change ☒ Addition
2.2 NAME JACK KEMPER
2.3 STREET ADDRESS 269 Deerwood Cir #3
2.4 CITY-ST-ZIP NAPLES FL

TITLE SD ☒ DELETE
NAME YOUNG, JEAN
STREET ADDRESS 267 DEERWOOD CIR #14
CITY-ST-ZIP NAPLES FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PD ☐ DELETE
NAME DE PEW, THERESA
STREET ADDRESS 269 DEERWOOD CIR #4
CITY-ST-ZIP NAPLES FL

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

TITLE PD ☒ DELETE
NAME HUMBLE, OWEN
STREET ADDRESS 269 DEERWOOD CIR #5
CITY-ST-ZIP NAPLES FL

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

CR2E037 (9/96)