FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY -1 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N39296** (1)

1. Corporate Name

FIG TREE VILLAGE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~12000 HARBOUR RIDGE BLVD.~~ ~~2400 SOUTH FEDERAL HWY STE 40~~ ~~PALM CITY FL 34990~~ ~~US~~	~~P O BOX 2451~~ ~~STUART FL 34995~~ ~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/23/1990
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0208480 ☐ 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
21 12600 N.W Harbour Ridge Blvd	26 12600 N.W Harbour Ridge Blvd
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Palm City FL	City & State 28 Palm City, FL
Zip 24 34990 Country 25 USA	Zip 29 34990 Country 30 USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SCHULER, JACK, C 13403 WAX MRYTLE TRAIL PALM CITY FL 34990	81 Name: Michael E Neary 82 Street Address (P.O. Box Number is Not Acceptable): 12600 N.W. Harbour Ridge Blvd 83 84 City: Palm City FL 85 Zip Code: 34990

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: Michael E. Neary — Michael E. Neary (Typed or printed name of registered agent) — DATE: 3/10/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	DP ☒ Change ☐ Addition
NAME	DODGE, JOHN B.	12 NAME	Kressler, James P.
STREET ADDRESS	13403 WAX MYRTLE TRAIL	13 STREET ADDRESS	13016 Harbour Ridge Blvd.
CITY ST ZIP	PALM CITY FL	14 CITY ST ZIP	Palm City, FL 34990
TITLE	DV	21 TITLE	DV ☒ Change ☐ Addition
NAME	BOESE, LESTER W.	22 NAME	Shortly, John L.
STREET ADDRESS	13403 WAX MYRTLE TRAIL	23 STREET ADDRESS	13018 Harbour Ridge Blvd.
CITY ST ZIP	PALM CITY FL	24 CITY ST ZIP	Palm City, FL 34990
TITLE	DST	31 TITLE	DST ☒ Change ☐ Addition
NAME	SCHULER, JACK C.	32 NAME	Shuter, Pamela
STREET ADDRESS	13403 WAX MYRTLE TRAIL	33 STREET ADDRESS	13017 Harbour Ridge Blvd.
CITY ST ZIP	PALM CITY FL	34 CITY ST ZIP	Palm City, FL 34990
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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 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: James P. Kressler — JAMES P. KRESSLER — 3/10/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0021030