

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 21, 2007 8:00 am**  
**Secretary of State**

05-21-2007 90052 004 \*\*\*\*61.25

**DOCUMENT # N39837**

1. Entity Name

**OZLYN GARDEN VILLAS CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

2846 ARBUTUS STR  
NAPLES FL 33962  
US

2846 ARBUTUS STR  
NAPLES FL 33962  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0169071

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REPATH, DAVE  
2846 ARBUTUS STR  
NAPLES FL 34112

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: D ☐ Delete  
NAME: MORGAN, ROY  
STREET ADDRESS: 2854 ARBUTUS STR  
CITY-STATE-ZIP: NAPLES FL 34112

TITLE: VD ☐ Delete  
NAME: SHINEBARGER, SHIRLEY  
STREET ADDRESS: 2850 ARBUTUS ST.  
CITY-STATE-ZIP: NAPLES FL 34112

TITLE: DP ☐ Delete  
NAME: REPATH, DAVE  
STREET ADDRESS: 2846 ARBUTUS ST.  
CITY-STATE-ZIP: NAPLES FL 34112

TITLE: D ☒ Delete  
NAME: RIZZI, LEISA  
STREET ADDRESS: 2842 ARBUTUS ST  
CITY-STATE-ZIP: NAPLES FL 34112

TITLE: D ☒ Delete  
NAME: CASEY, TIMOTHY  
STREET ADDRESS: 2836 ARBUTUS STREET  
CITY-STATE-ZIP: NAPLES FL 34112

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

TITLE: ☒ Change ☐ Addition  
NAME: MICK RANDOL  
STREET ADDRESS: 2854 ARBUTUS ST  
CITY-STATE-ZIP: NAPLES FL 34112

TITLE: ☒ Change ☐ Addition  
NAME: JOHN HALTOMAN  
STREET ADDRESS: 2848 ARBUTUS ST  
CITY-STATE-ZIP: NAPLES, FL 34112

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DAVE REPATH

4/30/07 239-793-3184