FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR -6 AM 6:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N40239 (8)

1. Corporation Name

BAREFOOT BEACH CLUB II CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
~~259 LELY BEACH BOULEVARD~~ ~~BONITA SPRINGS FL 33923~~	~~259 LELY BEACH BOULEVARD~~ ~~BONITA SPRINGS FL 33923~~

3. Date Incorporated or Qualified: 10/08/1990
3a. Date of Last Report: 03/07/1994
4. FEI Number: ~~59-3050989~~ ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26 1044 Castello Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27 Suite 206
City & State	City & State
23	28 Naples, FL
Zip / Country	Zip / Country
24 / 25	29 33940 / 30 USA

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~KUGSNER, STEPHEN L.~~ ~~SUITE 2100, ONE TAMPA CITY CENTER BLDG.~~ ~~PO BOX 3439~~ ~~TAMPA FL 33601~~	81 Name: Southwest Property Management Corp. 82 Street Address (P.O. Box Number is Not Acceptable): 1044 Castello Drive 83: Suite 206 84 City: Naples **FL** 85 Zip Code: 33940

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: ~~Stephen L. Kugsner~~ 3/30/95
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	~~PD~~	11 TITLE	S/D ☐ Change ☐ Addition
NAME	~~OELSCHLAEGER, EDWARD R.~~	12 NAME	Sander, Robert
STREET ADDRESS	~~511 W.BAY ST.,#900~~	13 STREET ADDRESS	260 Lely Beach Blvd. #401
CITY ST ZIP	~~TAMPA, FL~~	14 CITY ST ZIP	Bonita Springs, FL 33923
TITLE	~~D~~	21 TITLE	P/D ☐ Change ☐ Addition
NAME	SMITH, EDWARD	22 NAME	
STREET ADDRESS	260 LELY BEACH BLVD., #301	23 STREET ADDRESS	
CITY ST ZIP	BONITA SPGS. FL	24 CITY ST ZIP	
TITLE	~~STD~~	31 TITLE	T/D ☐ Change ☐ Addition
NAME	~~WEBER, BRYAN~~	32 NAME	Winemille, James
STREET ADDRESS	~~259 LELY BEACH BLVD.~~	33 STREET ADDRESS	261 Lely Beach Blvd. #PH3
CITY ST ZIP	~~BONITA SPGS. FL~~	34 CITY ST ZIP	Bonita Springs, FL 33923
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: 3/31/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Edward Smith

0016670