FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N43484

1. Corporation Name

(7)

SECTION 26 PROPERTY OWNERS' ASSCOCIATION, INC.

Prin	ncipal Place	of Business	Mailing Address						
1780 DEBORAH DRIVE ####################################									
			us			 Date incorporated or Qualified 05/20/1991 	3. Date incorporated or Qualified 05/20/1991 3a. Date of Last Report 05/01/1995		
2. I 21	Principal Pla	Place of Business 2a. Mailing Address 26		****	***************************************	4. FEI Number 65-0261958	65-0261059		
	Suite, Apt.	ite, Apt. #, etc. Suite, Apt. #, etc.			SR 75 Addition		Not Applicable 5 Additional		
22	27 Orty & State Crty & State					Certificate of Status Desired	7 -	Required	
23	Ony & State	Orty & State Crity & State				 Election Campaign Financing Trust Fund Contribution 	S5.00 May Be Added to Fees		
,	Zιρ	Country Zip		Country		8. This corporation has liability for in	This corporation has liability for intangible tax under s. 199.032,		
24		9. Name and Address of Current	29 Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes 🗶 No		
	-	J. Harris Bild Addiess of Odiffeli	Trogratered Agent	81	Name	10. Name and Address of New Re	Jistereo Agent	<u></u>	
	BECHTO	l, miriam		82	82 Street Address (P.O. Box Number is Not Acceptable)				
	1780 DEBORAH DR				<u> </u>	ress (F.O. Box Number is Not Acceptable)			
	SUTIE 20) Gorda Fl 33950		83					
	PUNIA C	30UDA LE 22820		84	City		FL B5 Z	ip Code	
	or register familiar wit - NATURE	ed agent, or both, in the State of Florid h, and accept the obligations of, Section	a. Such change was authori on 617.0503, Florida Statute	zed by the corr	named co poration's	orporation submits this statement for the purp board of directors. I hereby accept the appoin	ose of changing its	registered office d agent. I am	
12.		Signature, typed or printed name of registered agent a OFFICERS AND		OTE: Registered Age	nt signature n	equired when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE	000 IN 40	
711LE		DV OFFICERS AND	DIRECTORS	1 1 TITLE		カレ	F71 Change	ORS IN 12	
NAM:	- 1	PAUL, LISA S		12 NAME		GARVER, DEAN 745-1212 and Suite 1	E J Gridingo		
STRE	EET ADDRESS			13 STREE	ADDRESS	745-1200 ane Juite 1	-		
	- ST - ZIP	NAPLES FL		14 CHY-	ST-ZIP	Naples, Fl.			
TITLE	- 1	DP	DELETE	2 1 TITLE			Change	Addition	
NAM	TAYLOR, WILLIAM B 1780 DEBORAH DRIVE #18			2.2 NAME					
	ST-ZIP PUNTA GORDA FL			2 3 STREET ADDRESS 2 4 City-St-Zip					
TITLE		DST	DELETE		31-611		☐ Change	Addition	
NAMI	E	BECHTOL, MIRIAM		3 2 NAME					
STRE	F1 ADDRESS	1780 DEBORAH DR SUITE 20		3.3 STREET	ADDRESS				
	SI-ZIP PUNTA GORDA FL		Florier	3 4. CITY - ST - ZIP		1.00			
TITLE		DELETE		4.1 TOTLE			☐ Change	Addition	
	ET ADDRESS			4. 2 NAME	ADDRESS				
	· St - ZIP			4.4 City-5					
TITLE	-		DELETE	51 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	■ Addition	
NAME	E			5 2 NAME					
STRE	ET ADDRESS			53STREE	ADDRESS				
	-ST-ZiP			5.4 CITY-5	ST-ZIP				
HILE			DELETE	61 TITLE			Change	Addition Addition	
NAME				6 2 NAME					
	ET ADDRESS			6.3 STREET					
14.	-S1-ZiP -Fdo hereb	v certify that the information supplied w	rith this filing is valuntarily fun	6.4 CITY-5	s not qua	lify for the exemption stated in Section 119.0	7/31/k) Florida Stati	ites I further	
	certify that oath; that I	the information indicated on this annua	al report or supplemental and ation or the receiver or truste	nual report is tri se empowered	ie and ac	curate and that my signature shall have the sa e this report as required by Chapter 617, Flor	ame lonal offert as	if made under	

SIGNATURE: Sichon 26 Praperty Quenero asse dec. 31.20,1496 941-637-6253

CR2E037 (12/95)