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Apr 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N49487** (4)

1. Corporation Name

LE CIEL VENETIAN TOWER ASSOCIATION, INC.

Principal Place of Business 3971 GULF SHORE BLVD. NORTH NAPLES FL 33940	Mailing Address 3971 GULF SHORE BLVD. NORTH NAPLES FL 33940
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3. Date Incorporated or Qualified

06/22/1992

4. FEI Number

65-0341384

Applied For
Not Applicable

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 **34103** 25 29 **34103** 30

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FALK, STEVEN
850 PARK SHORE DRIVE
TRIAXION CENTRE, THIRD FLOOR
NAPLES FL 33940**

81 Name

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

83

84 City

FL 85 Zip Code **34103**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	FITTIPALDI, FRANK	
STREET ADDRESS	3971 GULF SHORE BLVD. NO., #1201	
CITY-ST-ZIP	NAPLES FL	

TITLE	VD	☐ DELETE
NAME	ROTHWELL, WARREN	
STREET ADDRESS	3971 GULF SHORE BLVD. NO., #801	
CITY-ST-ZIP	NAPLES FL	

TITLE	SD	☐ DELETE
NAME	NELSON, CHARLES	
STREET ADDRESS	3971 GULF SHORE BLVD. NO., #805	
CITY-ST-ZIP	NAPLES FL	

TITLE	TD	☐ DELETE
NAME	TUCKER, ROBERT	
STREET ADDRESS	3971 GULF SHORE BLVD., NO., #1101	
CITY-ST-ZIP	NAPLES FL	

TITLE	PD	☐ DELETE
NAME	REICE, CHARLES	
STREET ADDRESS	3971 GULF SHORE BLVD N #1805	
CITY-ST-ZIP	NAPLES FL	

TITLE	TD	☒ DELETE
NAME	MCGUIRE, FRANK	
STREET ADDRESS	3971 GULF SHORE BLVD NO #502	
CITY-ST-ZIP	NAPLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	Secretary
1.3 STREET ADDRESS	Joseph Donahue
1.4 CITY-ST-ZIP	3971 Gulf Shore Blvd. No. PH201

2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Naples, FL
2.3 STREET ADDRESS	Director
2.4 CITY-ST-ZIP	

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

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

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

6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	Director
6.3 STREET ADDRESS	Jennie Jones
6.4 CITY-ST-ZIP	3971 Gulf Shore Blvd. No. #1501

14. I 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.

SIGNATURE: *Charles T. Reice* **CHARLES T. REICE** 3-26-98 261-1157

CR2E037 (10/97)