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FILED
Apr 23 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N93000000205 (5)**

1. Corporation Name

THE OLDE HICKORY VERANDAS CONDOMINIUM III ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**12661 NEW BRITTANY BLVD
FT MYERS FL 33907
US**

**12661 NEW BRITTANY BLVD
FT MYERS FL 33907-3631
US**

3. Date Incorporated or Qualified
01/12/1993

3a. Date of Last Report
04/02/1996

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

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Stilphen, Peter
Marquis Management, Inc.
12661 New Brittany Blvd.
Fort Myers, FL 33907**

81 Name

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

83

84 City

FL

85 Zip Code

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	PD	<input checked="" type="checkbox"/> DELETE
NAME	SOKEI, EDWARD	
STREET ADDRESS	#823 14520 HICKORY HILL CT.	
CITY-ST-ZIP	FORT MYERS FL 33912	

TITLE	STD	<input type="checkbox"/> DELETE
NAME	MOSON, CONNIE	
STREET ADDRESS	14530 HICKORY HILL CT #922	
CITY-ST-ZIP	FT MYERS FL	

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	GURCAK, JOSEPH	
STREET ADDRESS	25850 HICKORY BLVD A102	
CITY-ST-ZIP	BONITA SPRINGS FL	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LEWIS, PAM	
STREET ADDRESS	14540 HICKORY HILL CT #1026	
CITY-ST-ZIP	FT MYERS FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	LEADLEY, HERB	
STREET ADDRESS	14550 HICKORY HILL CT #1116	
CITY-ST-ZIP	FT MYERS FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	WILLIAMS, NATALIE	
1.3 STREET ADDRESS	14530 HICKORY HILL CT	
1.4 CITY-ST-ZIP	FORT MYERS, FL 33912	

2.1 TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MAISON, CONNIE	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	GETMAN, JACK	
3.3 STREET ADDRESS	14540 HICKORY HILL CT. #1011	
3.4 CITY-ST-ZIP	FORT MYERS, FL 33912	

4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	STOLL, LARRY	
4.3 STREET ADDRESS	14530 HICKORY HILL CT. #922	
4.4 CITY-ST-ZIP	FORT MYERS, FL 33912	

5.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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:

[Signature]

2/11/1997

939-3461

CR2E037 (9/96)