

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90142 011 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N94000001058 1. Corporation Name DOVE VILLAS I, COOPERATIVE ASSOCIATION, INC.			
Principal Place of Business 1150 JIMMY ANN DR DAYTONA BEACH FL 32114		Mailing Address 1150 JIMMY ANN DR DAYTONA BEACH FL 32114	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified 02/28/1994		4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent PADGETT, GLENN R 555 W GRANADA BLVD SUITE D-11 ORMOND BEACH FL 32174		10. Name and Address of New Registered Agent 81 Name DANIEL O. ROLL 82 Street Address (P.O. Box Number is Not Acceptable) 100 JIMMY HUGAR CIRCLE 83 84 City DAYTONA BEACH FL 85 Zip Code 32117	
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 DANIEL O. ROLL, PRESIDENT <i>Daniel O. Roll, President</i> 3-18-99 (NOTE: Registered Agent signature required when reappointing) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D ☐ DELETE NAME KOCH, GILBERT STREET ADDRESS 3945 S PENINSULA DR CITY-ST-ZIP DAYTONA BEACH FL		1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE P ☐ DELETE NAME SYLVESTRE, RAYMOND STREET ADDRESS 1369 COSTA DEL SOL DR CITY-ST-ZIP DAYTONA BEACH FL		2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE S ☐ DELETE NAME SLADE, KATHLEEN O STREET ADDRESS 311 N. CLYDE MORRIS BLVD., SUITE 360 CITY-ST-ZIP DAYTONA BEACH FL		3.1 TITLE ☒ Change ☐ Addition 3.2 NAME DIRECTOR 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE VP ☐ DELETE NAME DUNKLE, JACK D. STREET ADDRESS 33 MEADOW RIDGEVIEW CITY-ST-ZIP ORMOND BCH FL		4.1 TITLE ☒ Change ☐ Addition 4.2 NAME TREASURER 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE T ☐ DELETE NAME SNYDER, JIM L STREET ADDRESS 2041 ANCHOR AVENUE CITY-ST-ZIP DELAND FL		5.1 TITLE ☒ Change ☐ Addition 5.2 NAME VICE PRESIDENT 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE D ☒ DELETE NAME THAYER, DONALD S. STREET ADDRESS 6 FOUNTAINBLEAU CIR CITY-ST-ZIP DAYTONA BCH FL		6.1 TITLE ☐ Change ☒ Addition 6.2 NAME DIRECTOR 6.3 STREET ADDRESS CALISE, DOOTHY WARD 6.4 CITY-ST-ZIP 57 SEAKINDS CIRCLE POKE INLET FL 32127	

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RAYMOND SYLVESTRE PRESIDENT

8-18-99

904-274-4786

CR2037 (1/98)