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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N95000001073**

1. Corporation Name

CASA DEL MAR ESTATES MOBILE HOMEOWNERS ASSOCIATI ON INC.

Principal Place of Business	Mailing Address
29200 JONES LOOP ROAD LOT 365 PUNTA GORDA FL 33950 US	29200 JONES LOOP ROAD LOT 365 PUNTA GORDA FL 33950 US

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	3. Date Incorporated or Qualifed 03/07/1995 4. FEI Number ~~65-0739191~~ 65-0149725 ☐ Applied For ☐ Not Applicable 5. Certifcate 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	10. Name and Address of New Registered Agent
ROYDS, LOU 29200 JONES LOOP ROAD LOT 327 PUNTA GORDA FL 33950	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 Lou Royds
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P KIRSHC, WILLIAM #365, 29200 JONES LOOP RD. PUNTA GORDA FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D ROYDS, LOU 29200 JONES LOOP RD #327 PUNTA GORDA FL 33950	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WEBSTER, WILLIAM #178, 29200 JONES LOOP RD. PUNTA GORDA FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D CRONAN, WILLIAM J 29200 JONES LOOP RD #319 PUNTA GORDA FL 33950	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WAGNER, WILLIAM #179, 29200 JONES LOOP RD. PUNTA GORDA FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D DIETRICH, ANDREW #231 29200 JONES LOOP PUNTA GORDA FL 33950	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MELANSON, LEONARD #330, 29022 JONES LOOP ROAD PUNTA GORDA FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D TIMLECH, JAMES #309 29200 JONES LOOP PUNTA GORDA FL 33950	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOULTER, SHERMAN #181, 29200 JONES LOOP RD. PUNTA GORDA FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D MCKAIN, RUSSELL 29200 JONES LOOP #328 PUNTA GORDA FL 33950	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STAUFFENECKER, HOWARD #162, 29200 JONES LOOP RD. PUNTA GORDA FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D WASSERMAN, IANA 29200 JONES LOOP #368 PUNTA GORDA FL 33950	☐ Change ☐ Addition

CR2E037 (11/98)

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: Lou Royds SIGNATURE REQUIRED 1-20-99 (941) 575-4014
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #