

FILE NDW: FILING FEE IS \$61.25

FILED

Feb 19 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003844 (6)

1. Corporation Name

LES CHATEAUX COMMONS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2375 TAMiami TRAIL NORTH, SUITE 208
NAPLES FL 339402375 TAMiami TRAIL NORTH, SUITE 208
NAPLES FL 34103-44393. Date Incorporated or Qualified
08/14/19953a. Date of Last Report
07/18/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

3838 TAMiami TR. N., #410

27

3838 TAMiami TR. N., #410

City & State

City & State

23

NAPLES, FL

28

NAPLES, FL

Zip

Country

Zip

Country

24

34103

USA

29

34103

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JANE YEAGER CHEFFY, ATTORNEY AT LAW
2375 TAMiami TRAIL NORTH, SUITE 207
NAPLES FL 33940-4439

81

Name

J. THOMAS CONROY III

82

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

975-6TH AVENUE SO.

83

SUITE 101

84

City

NAPLES

FL

85

Zip Code

33940

11. Pursuant to the provisions of Sections 617.0502 and 617.1503, 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
NAME
STREET ADDRESS
CITY - ST - ZIP

D

KESSOUS, MICHAEL

2375 TAMiami TRAIL NORTH, SUITE 208
NAPLES FL 33940☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

STEVENS, PATRICIA

2375 TAMiami TRAIL NORTH, SUITE 208
NAPLES FL 33940☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

BOWERSOCH, SHIRLEY

2375 TAMiami TRAIL NORTH, SUITE 208
NAPLES FL 33940☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP3838 TAMiami TR. N., #410
NAPLES, FL 34103☒ Change ☐ Addition2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP3838 TAMiami TR. N., #410
NAPLES, FL 34103☒ Change ☐ Addition3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP3838 TAMiami TR. N., #410
NAPLES, FL 34103☒ Change ☐ Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP☐ Change ☐ Addition5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP☐ Change ☐ Addition6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP☐ Change ☐ Addition

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:

REQUIRED

1-23-97

941-648-1830

CR2E037 (9/96)