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May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000003210 (9)

1. Corporation Name

VERANDA I AT SOUTHERN LINKS ASSOCIATION, INC.



Principal Place of Business

~~10491 SIX MILE CYPRESS PARKWAY
SUITE 101
FT. MYERS FL 33912~~

Mailing Address

~~10491 SIX MILE CYPRESS PARKWAY
SUITE 101
FT. MYERS FL 33912-6406~~

2. Principal Officers and Directors

21 c/o Gulf Coast Management Services
10060 Amberwood Road, Suite 3
Fort Myers, Florida 33913

c/o Gulf Coast Management Services
10060 Amberwood Road, Suite 3
Fort Myers, Florida 33913

3. Date Incorporated or Qualified
06/13/1996

3a. Date of Last Report

4. FEI Number

05-0680740

Applied For
 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

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes Yes No

10. Name and Address of New Registered Agent

24 25 29 30
9. Name and Address of Current Registered Agent

~~SWALM & MURRELL, P.A.
2975 TAMiami TRAIL N.
SUITE 300
NAPLES FL 33940~~

81 Name Robert E. Gelles

82 Street

c/o Gulf Coast Management Services

10060 Amberwood Road, Suite 3

84 City Fort Myers, Florida 33913

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 Robert E. Gelles

SIGNATURE Robert E. Gelles

4/20/97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (1-12)

TITLE D PERSICILLI, ANTHONY DELETE

NAME
STREET ADDRESS 10491 SIX MILE CYPRESS PKWY. #101
CITY-ST-ZIP FT. MYERS FL 33912

TITLE D MCMURRAY, DARIN DELETE

NAME
STREET ADDRESS 10491 SIX MILE CYPRESS PKWY. #101
CITY-ST-ZIP FT. MYERS FL 33912

TITLE D BURNS, ALAN DELETE

NAME
STREET ADDRESS 10491 SIX MILE CYPRESS PKWY. #101
CITY-ST-ZIP FT. MYERS FL 33912

TITLE DELETE

NAME DELETE

STREET ADDRESS DELETE

CITY-ST-ZIP DELETE

TITLE DELETE

NAME DELETE

STREET ADDRESS DELETE

CITY-ST-ZIP DELETE

11 TITLE Change Addition

12 NAME Change Addition

13 STREET ADDRESS Change Addition

14 CITY-ST-ZIP Change Addition

21 TITLE Change Addition

22 NAME Change Addition

23 STREET ADDRESS Change Addition

24 CITY-ST-ZIP Change Addition

31 TITLE Change Addition

32 NAME Change Addition

33 STREET ADDRESS Change Addition

34 CITY-ST-ZIP Change Addition

41 TITLE Change Addition

42 NAME Change Addition

43 STREET ADDRESS Change Addition

44 CITY-ST-ZIP Change Addition

51 TITLE Change Addition

52 NAME Change Addition

53 STREET ADDRESS Change Addition

54 CITY-ST-ZIP Change Addition

61 TITLE Change Addition

62 NAME Change Addition

63 STREET ADDRESS Change Addition

64 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)(c), 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 2 or Block 13 if checked, or on an attachment with an address.

SIGNATURE [Handwritten Signature] 4/11/97

CR2E037 (9/96)