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NONPROFIT CORPORATION ANNUAL REPORT

1997



DOCUMENT # N96000004415
1. Corporation Name
CONDOMINIUM ASSOCIATION OF
GOLF VILLAS II, INC.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretaryyof State
DIVISION OF CORPORATIONS

14/5

FILED

Jun 26 1997 8:00am

Secretary of State

Suite, Apt #, etc.    Suite, Apt #, etc.		ce of Business	Mailing Address		•			
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. All Fill Number 3. Applied 3. Clay & State 3. Suite, Apt #, etc. 3. Suite Apt #, etc. 3. Suite, Apt #, e	DALL	st lucie til	9801 Perf	ect Di	rive			
2. Principal Place of Business   2a. Mailing Aptifess   4. FE Number   Applied 21   25   Next Apt #, etc.   25   Suite, Apt #, etc.   27   Suite, Apt #, etc.   28   Suite   City & State   6. Election Campaign Financing   \$5.00 May Added to Fee Applied Suite   28   Suite   Added so for the Applied Suite   28   Suite   Sui	34986 PORT ST. LUCIE, 3498					3. Date Incorporated or Qualified   3a. Date of Last Report		
Suite Apt #, etc.    Suite Apt #, etc.   Suite App #, etc.   Suite	2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	A	pplied For
City & State  Country  Registered Agent  B. This corporation has labelly for intenging by under s. 1994 Fords State Registered Agent  Beth Teardo Prinz  I/OO S. Federal Highway  Stuart, Florida 34999  81  82 Street Address (P.O. Box Number is Not Acceptable)  Fig. Pursuant to the provisions of Sections 612 0502 and 612 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am mallie with, and except the obligation of, Section for 17 5009, Florida Statutes  Fig. Pursuant to the provisions of Sections 612 0502 and 612 1508. Florida Statutes  Street Address (P.O. Box Number is Not Acceptable)  Fig. Pursuant to the provisions of Sections 612 0502 and 612 1508. Florida Statutes  Street Address (P.O. Box Number is Not Acceptable)  Fig. Pursuant to the provisions of Sections 612 0502 and 612 1508. Florida Statutes  Fig. Pursuant to the provisions of Sections 612 0502 and 612 1508. Florida Statutes  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Pursuant to the provisions of Sections 612 0502 and 612 1508. Florida Statutes  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Acceptable)  Fig. Street Address (P.O. Box Number is Not Accepta						65-0744078	N	ot Applicable
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Zip   Country   Zip   Country   Strick corporation has lability for intangible gar under s. 1994   Strick corporation has lability for intangible gar under s. 1994   No		te	<del></del>			, , , , , , , , , , , , , , , , , , ,		
9. Name and Address of Current Registered Agent  Beth Teardo Prinz  1/00 S. Federal Highway  Stuart, Florida 3 34999  11. Pursuant to the provisions of Socions 617,0502 and 617,1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits this statement for the purpose of changing its regist of the corporation submits in statement for the purpose of changing its regist of the cor	7in	Country		Count	71/			
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Beth Teardo Prinz  //OD S. Federal Highway Stuart, Florida 34999  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 regination of registered agant, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registation of the corporation's board of directors. I hereby accept the appointment as registation and accept the obligations of, Section 617,0503, Florida Statutos.  INDITIONAL PROPERTY OF THE CONTROL OF				1901	··········			
Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Numbe	R			8	1 Name			
Ti. 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 reging office or registered agont, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutos.    Image:   Im	De	THI TEATOO PY	Inz	_	<b>8</b>	(0.0 D. N.	<del> </del>	<del></del>
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office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Socion 617.0503, Florida Statutes.    Signature with, and accept the obligations of, Socion 617.0503, Florida Statutes.	11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Stat	lutes, the abo	ve-named co	rporation submits this statement for the purpor	• -	ts registered
Signature. typed or printed name of registered agent and late of applicable (NOTE Registered Agent segnature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 COLV-S1-2IP  1.5 STREET ADDRESS  1.6 LUGOD LANDS BLVD.  1.7 STREET ADDRESS  1.7 LUGOD LANDS BLVD.  1.8 STREET ADDRESS  1.9 LUGOD LANDS BLVD.  1.1 LITLE  1.1 TITLE  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  2.1 TITLE  1.4 COLV-S1-2IP  1.5 STREET ADDRESS  2.1 LUGOD LANDS BLVD.  2.2 NAME  2.3 STREET ADDRESS  2.4 COLV-S1-2IP  1.7 STREET ADDRESS  2.4 COLV-S1-2IP  1.7 STREET ADDRESS  2.7 STREET ADDRESS  2.8 STREET ADDRESS  2.9 NAME  3.9 STREET ADDRESS  2.1 LUGOD LANDS BLVD.  2.2 NAME  3.2 NAME  3.3 STREET ADDRESS  2.3 STREET ADDRESS  2.4 COLV-S1-2IP  3.4 COLV-S1-2IP  3.4 COLV-S1-2IP  3.5 STREET ADDRESS  2.7 STREET ADDRESS  3.7 STREET ADDRESS  3.	office or r	registered agent, or both, in the Stat	e of Florida. Such change wa	is authorized b	by the corpora	ation's board of directors. I hereby accept the	e appointment as	registered
Signature, typed or primed name of registered aport and little displicable (INOTE Registered Aport signature required when remaining) DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ITILE  NAME  JOHN K. NIERCUCH  1.2 NAME  1.3 STREET ADDRESS  OLOSMAR, PL 346 77  DELETE  NAME  STREET ADDRESS  CITY-S1-ZIP  OLOSMAR, PL 346 77  DELETE  3.1 ITILE  DELETE  3.1 ITILE  DELETE  3.2 STREET ADDRESS  CITY-S1-ZIP  DELETE  3.3 STREET ADDRESS  CITY-S1-ZIP  DELETE  3.3 STREET ADDRESS  CITY-S1-ZIP  DELETE  3.4 CITY-S1-ZIP  DELETE  3.5 STREET ADDRESS  CITY-S1-ZIP  DELETE  3.5 STREET ADDRESS  CU-OSMAR, PL 346 77  DELETE  3.5 STREET ADDRESS  CU-OSMAR, PL 346 77  DELETE  3.5 STREET ADDRESS  CU-OSMAR, PL 346 77  DELETE  3.5 STREET ADDRESS  CUTY-S1-ZIP  DELETE  5.5 TITLE  NAME  5.5 NAME  5.5 STREET ADDRESS  SACITY-S1-ZIP  DELETE  5.5 NAME  5.5 STREET ADDRESS  SACITY-S1-ZIP  DELETE  5.5 NAME  5.5 STREET ADDRESS  SACITY-S1-ZIP  Change	•	arri larrimar with, and accept the obig	janons of, obolion of 7.0305,	Tionda otatut				
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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 oal 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	informatio	on indicated on this annual report or	supplemental annual report is	s true and acc	curate and the	at my signature shall have the same legal effe	ect as if made und	der oath: tha