FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

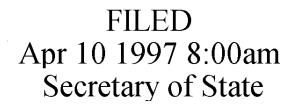
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600006313 (8)

LAKEVIEW I AT CARLTON LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address





| 2405 PIPER BLVD. NAPLES FL 34110 | | 2405 PIPER BLVD. NAPLES FL 34110-1387 | | 9. Data Incorporated or Qualified | 3a. Date | of Loot | Panart | |
|--|--|---|---|--|--|------------------------------|---------------------|--------------------------------|
| | | | | | Date Incorporated or Qualified 12/11/1996 | 3a. Date | or Last | нероп |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | A | pplied For |
| 21 | | 26 | | | 65-072033 | | | lot Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | Additional |
| 22) | | 27 City 8 City 9 | | | | | | Required |
| City & State | 3 | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | |) May Be I to Fees |
| Zip | Country | Zip | Countr | У | 8. This corporation has liability for i | | | s. 199.032, |
| 24 | 25 25 Name and Address of Curren | 29 | 30 | | Florida Statutes 10. Name and Address of New Re | Yes [_] | | |
| | a. Maille and Address of Cuffen | r wediereren Wanir | 81 | Name | TO. HAITE AND ACCUSES OF NEW NO | Arereren WA | UIII | |
| - OMAINA | e Alliopei III D.A | | | | | | | |
| | & MURRELL, P.A. MIAMI TRAIAL NORTH | | 82 Street Add | | dress (P.O. Box Number is Not Acceptab | le) | | |
| SUITE 30 | | | 83 | <u>, </u> | | | | |
| | FL 34103 | | | ļ | · · · · · · · · · · · · · · · · · · · | | | <u></u> |
| TIM LEO | 1 2 0 1 1 0 0 | | 84 | City | | FL | 65 Zip | Code |
| 11. Pursuant to office or reagent. Lar | to the provisions of Sections 617.050; egistered agent, or both, in the State m familiar with, and accept the obliga | Pand 617,1508, Florida Statu of Florida. Such change was alions of, Section 617,0503, F | ites, the above authorized b lorida Statute | ve-named cor by the corpora es. | rporation submits this statement for the p ation's board of directors. I hereby accep | urpose of c It the appoin | hanging ntment a | its registered s registered |
| OIGHATORE _ | Signature, typed or printed name of registered ager | | | gent signature req | uired when reinstating) | DATE | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | | | |
| TITLE | D STATIONER OF IDIOTORIES O | ☐ DEL€TE | 1.1 TITLE | | | l | Change | Addition |
| NAME | CLAUSSEN, CHRISTOPHER G | ŀ | 1.2 NAME | | | | | |
| STREET ADDRESS | 2405 PIPER BLVD. NAPLES FL 33942 | | l l | T ADDRESS | | | | |
| CITY-ST-ZIP | D 1947LEO FL 33842 | DELETE | 1.4 CITY- 2.1 TITLE | SI-ZIP | | | Change | Addition |
| NAME | CLAUSSEN, ROBERT G | | 2.1 THEC | | | _ | _ | |
| STREET ADDRESS | 2405 PIPER BLVD. | | | T ADDRESS | | | | |
| CITY-ST-ZIP | NAPLES FL 33942 | | 2.4 CITY- | | | | | |
| TITLE | D | DELETE | 3.1 TITLE | J. 23 | | | Change | Addition |
| NAME | THOMPSON, STEPHEN R | | 3.2 NAME | İ | | | | |
| STREET ADDRESS | 2405 PIPER BLVD. | | 3.3 STREE | T ADDRESS | | | | |
| CITY-ST-ZIP | NAPLES FL 33942 | | 3.4. C(TY- | -ST-ZIP | | | | |
| TITLE | | ☐ DELETE | 41 TITLE | | | |] Change | Addition |
| NAME | | | 4 2 NAME | | | | | |
| STREET ADDRESS | | | 4.3 STREE | T ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY- | ST-ZIP | | <u>.</u> | | <u> </u> |
| TITLE | | ☐ DELFTE | 5.1 TITLE | | | L |] Change | ☐ Addition |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | 5.3 STREE | T ADDRESS | | | | |
| CITY-ST-ZIP | | M pereve | 5.4 CITY - | ST-ZIP | | <u></u> | 1 0 | 1 4 4 4 9 1 1 |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | L |] Change | Addition |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | • | T ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 CITY - | ST-7(P | | | | |

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.

De lesson with the sales

CR2E037 (9/96)