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May 14 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # N97000005662 (8)

1. Corporation Name

THE ASHLAND INC. RETIREES CLUB OF SOUTHWESTERN F  
LORIDA, INC.

Principal Place of Business

Mailing Address

C/O APAC-FLORIDA, INC.  
10230 ALICO ROAD  
FT. MYERS FL 33913

C/O APAC-FLORIDA, INC.  
10230 ALICO ROAD  
FT. MYERS FL 33913

3. Date Incorporated or Qualified

10/06/1997

4. FEI Number

31-1591682

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TANNER, WESLEY U  
C/O APAC-FLORIDA, INC.  
10230 ALICO ROAD  
FT. MYERS FL 33913

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

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 D ☐ DELETE  
NAME GARGES, ALAN R  
STREET ADDRESS 18549 N. CLEVELAND AVENUE, #12  
CITY-ST-ZIP N. FT. MYERS FL 33903

1.1 TITLE P/D ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME SAUNDERS, RICHARD L  
STREET ADDRESS 4114 SPANKER COURT, #1D  
CITY-ST-ZIP FT. MYERS FL 33919

2.1 TITLE V/D ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 5260 S. Landings Dr #603  
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME MARRS, SAMUEL R  
STREET ADDRESS 10200 PINE GLEN DRIVE  
CITY-ST-ZIP FT. MYERS FL 33912

3.1 TITLE V/D ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 25490 Cockle shell Dr. #602  
3.4 CITY-ST-ZIP Bonita Springs, FL 34135

TITLE D ☐ DELETE  
NAME WELTER, ROBERT L  
STREET ADDRESS 5561 MONTILLA DRIVE  
CITY-ST-ZIP FT. MYERS FL 33919

4.1 TITLE V/D ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME WALTERS, MARY  
STREET ADDRESS 1391 SAUTERN DRIVE  
CITY-ST-ZIP FT. MYERS FL 33919

5.1 TITLE S/O ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME ZANDONA, OLIVER J  
STREET ADDRESS 4105 STEAMBOAT BEND E  
CITY-ST-ZIP FT. MYERS FL 33919

6.1 TITLE T/D ☒ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE: ALAN R. GARGES Alan R. Garges 4/20/98 941/656-5627

CR2E037 (10/97)