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Jun 18 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 # N97000006744 (3)

1. Corporation Name  
THE PRESERVE OF LITTLE GASPARILLA PHASE II PROPE  
RTY OWNERS ASSOCIATION, INC.



Principal Place of Business: 320 CAPSTAN DRIVE, CAPE HAZE FL 33946  
Mailing Address: 320 CAPSTAN DRIVE, CAPE HAZE FL 33946

3. Date Incorporated or Qualified: 12/03/1997  
4. FEI Number: Applied For  Not Applicable

2. Principal Place of Business: 21 705 E WASHINGTON ST., 22 BLOOMINGTON IL, 23 61701  
2a. Mailing Address: 26 705 E. WASHINGTON ST., 27 BLOOMINGTON IL, 28 61701

5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$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  
LEYDON, RICHARD W  
320 CAPSTAN DRIVE  
CAPE HAZE FL 33946

10. Name and Address of New Registered Agent  
81 Name: DENNIS J. TRACY  
82 Street Address (P.O. Box Number is Not Acceptable):  
83 229 PENSACOLA.  
84 City: VENICE FL 85 Zip Code: 34285

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: DENNIS J. TRACY (Signature typed or printed name of registered agent and title if applicable)  
(NOTE: Registered Agent signature required when resigning)  
DATE: 4/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEYDON, RICHARD W	1.2 NAME	
STREET ADDRESS	320 CAPSTAN DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE HAZE FL 33946	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIRZA, JEROME	2.2 NAME	
STREET ADDRESS	705 E. WASHINGTON STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	BLOOMINGTON IL 61701	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIRZA, JEROME	3.2 NAME	
STREET ADDRESS	705 E. WASHINGTON STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	BLOOMINGTON IL 61701	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEYDON, RICHARD W	4.2 NAME	
STREET ADDRESS	320 CAPSTAN DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE HAZE FL 33946	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRACY, DENNIS J	5.2 NAME	
STREET ADDRESS	229 PENSACOLA ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34285	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

Handwritten entries in Block 13:

- DP MIRZA, JEROME 705 E. WASHINGTON ST. BLOOMINGTON IL 61701
- T MIRZA, JEROME 705 E. WASHINGTON ST. BLOOMINGTON, IL. 61701
- SD MIRZA, CANDACE 1707 W. LAKE AVE. WILMETTE, IL 60091

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: [Handwritten Signature] 4-21-98 309-827-8011

CR2E037 (10/97)