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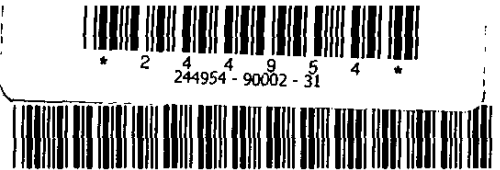
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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N98000004115**

1. Corporation Name
CIVIC ASSOCIATION OF BONITA SPRINGS, INC.

Principal Place of Business 10016 SE DELWARE ST. BONITA SPRINGS FL 34135	Mailing Address 10016 SE DELWARE ST. BONITA SPRINGS FL 34135
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2. Principal Place of Business 21 10016 SE DELAWARE ST Suite, Apt. #, etc.	2a. Mailing Address 26 10016 SE DELAWARE ST Suite, Apt. #, etc.	3. Date Incorporated or Qualified 07/13/1998
22 City & State 23 Bonita Springs FL	27 City & State 28 Bonita Springs FL	4. FEI Number Applied For <input checked="" type="checkbox"/> Not Applicable
24 34135 25 USA	29 34135 30 USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

GERBER, JOAN 10016 SE DELWARE ST. BONITA SPRINGS FL 34135	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 10016 SE DELAWARE ST 83 84 City FL 85 Zip Code
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Correction

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 Joan Gerber DATE January 24, 1999

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input type="checkbox"/> DELETE	NAME	1.1 TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	1.2 NAME	Clara Anne Graham Elliott
TITLE <input type="checkbox"/> DELETE	NAME	1.3 STREET ADDRESS	25201 Divot Drive
STREET ADDRESS	CITY-ST-ZIP	1.4 CITY-ST-ZIP	Bonita Springs FL 34135
TITLE <input type="checkbox"/> DELETE	NAME	2.1 TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	2.2 NAME	Bill Johns
TITLE <input type="checkbox"/> DELETE	NAME	2.3 STREET ADDRESS	12787 Hunters Ridge Drive
STREET ADDRESS	CITY-ST-ZIP	2.4 CITY-ST-ZIP	Bonita Springs FL 34135
TITLE <input type="checkbox"/> DELETE	NAME	3.1 TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	3.2 NAME	Carlos Lizano
TITLE <input type="checkbox"/> DELETE	NAME	3.3 STREET ADDRESS	824 Alderman St. #213
STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP	Ft Myers FL 33916
TITLE <input type="checkbox"/> DELETE	NAME	4.1 TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	Bob Mills
TITLE <input type="checkbox"/> DELETE	NAME	4.3 STREET ADDRESS	25501 Impatiens Ct
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	Bonita Springs FL 34135
TITLE <input type="checkbox"/> DELETE	NAME	5.1 TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME	Juan Romero
TITLE <input type="checkbox"/> DELETE	NAME	5.3 STREET ADDRESS	10010 SE Delaware St
STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP	Bonita Springs FL 34135
TITLE <input type="checkbox"/> DELETE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME	see attached pages
TITLE <input type="checkbox"/> DELETE	NAME	6.3 STREET ADDRESS	for additional directors
STREET ADDRESS	CITY-ST-ZIP	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, with all other like empowered.

SIGNATURE: Joan Gerber DATE January 24, 1999 (941) 849-7199

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (11/98)

President

Joan Gerber
10016 SE Delaware St
Bonita Springs FL 34135

2449519000231
N98000004115

Vice President

Vito Soranno
3972 Woodlake Drive
Bonita Springs FL 34134

Secretary

Meg Hutchins
27063 Allan St
Bonita Springs FL 34135

Treasurer

Flor Saldivar
27891 Matheson St
Bonita Springs FL 34135

Director

James Burnes
9060 Palmas Grande Lane #206
Bonita Springs FL 34135

Director

David Dilley
3720 Lakemont Drive
Bonita Springs FL 34134

Civic Association of Bonita Springs Inc.

Additional Directors

244954-900023

N9800004115

Ed Schuppenhauer
9834 Delaware St
Bonita Springs FL 34135

Frances Stallings
9835 Delaware St
Bonita Springs FL 34135

Charles Temple
24020 Production Circle
Bonita Springs FL 34135.

Frank Vullo
13450 Southampton Drive
Bonita Springs FL 34135.