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Apr 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N11750 (9)
1. Corporation Name
EAGLE CREEK COMMUNITY ASSOCIATION, INC.



Principal Place of Business % AMICO, DAVID J. ONE EAGLE CREEK DR. NAPLES FL 33962 US	Mailing Address % AMICO, DAVID J. ONE EAGLE CREEK DR. NAPLES FL 34113 US
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3. Date Incorporated or Qualified 10/25/1985	3a. Date of Last Report 04/24/1996
4. FEI Number 59-2610651	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 34113	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**AMICO, DAVID J.
ONE EAGLE CREEK DRIVE
NAPLES FL 33962**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code FL 34113

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 *David J. Amico* **DAVID J. AMICO, PRESIDENT** 4/4/97

12. OFFICERS AND DIRECTORS

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	AMICO, DAVID J.	
STREET ADDRESS	ONE EAGLE CREEK DRIVE	
CITY-ST-ZIP	NAPLES FL	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	AMICO, DAVID	
STREET ADDRESS	ONE EAGLE CREEK DRIVE	
CITY-ST-ZIP	NAPLES FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ODDI, FRANK	
STREET ADDRESS	140 CYPRESS VIEW DRIVE	
CITY-ST-ZIP	NAPLES FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SCHWAGER, HANSPETER	
STREET ADDRESS	ONE EAGLE CREEK DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	SHERWOOD, IRVING	
STREET ADDRESS	44 CYPRESS VIEW DR	
CITY-ST-ZIP	NAPLES FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STEINEMANN, HANSJORG	
STREET ADDRESS	ONE EAGLE CREEK DRIVE	
CITY-ST-ZIP	NAPLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	34113
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	D LIPPS, HERBERT
2.3 STREET ADDRESS	ONE EAGLE CREEK DRIVE
2.4 CITY-ST-ZIP	NAPLES, FL 34113
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	ZIP 34113
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D SCHMIDT, EVELYN
6.3 STREET ADDRESS	ONE EAGLE CREEK DRIVE
6.4 CITY-ST-ZIP	NAPLES, FL 34113

14. 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.

CR2E037 (9/96)