## **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

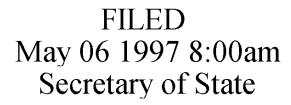
DOCUMENT #
1. Corporation Name

N95000004645 (6)

OAK COLONY AT THE VINEYARDS HOMEOWNERS' ASSOCIAT ION, INC.

Principal Place of Business

Mailing Address





98 VINEYARDS 8 NAPLES FL 3399		98 VINEYARDS BLVD. NAPLES FL 34119-4747								
					3. Date Incorporated or Qu 09/29/1995	3. Date Incorporated or Qualified 3a. D		Date of Last Report 02/27/1996		
2. Principal Plac	ce of Business	2a. Mailing Address	2a. Mailing Address				1 <u>.</u>	Ap	plied For	
21		26			65-0617219	65-0617219			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	1			sired	\$8.75 Additional Fee Required			
City & State		City & State	h			ncing	\$5.00 May Be Added to Fees			
Zip <b>24</b>	Country Zip Co			Country  8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes						
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of	New Reg	Istered Age	nt		
MORE, DO 98 VINEY NAPLES I	ards blvd.		[	31 Nan 32 Stre 33	ne et Address (P.O. Box Number is Not A	Acceptable	е)			
			ļī	City			FL 8	5 Zip	Code	
office or ren	the provisions of Sections 617.0 istered agent, or both, in the Sta familiar with, and accept the ob-	ito of Florida. Such channe was	c authorizad	hu the a	ed corporation submits this statement orporation's board of directors. I here	or the pu	irpose of cha t the appoint	inging it ment as	s registered registered	
Sig	gnature, typed or printed name of registered			Ageni signa	iture required when reinstating)		DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES T	O OFFICE				
TITLE	PD	☐ DELETE	1.1 TITL		PD			Change	Addition	
NAME	TOUSSEL, JOHN H JR.		1.2 NAA	Æ						
STREET ADDRESS	98 VINEYARDS BLVD.		1.3 STA	EET ADDRES	ss m	A/.				
CITY-ST-ZIP	NAPLES FL 33999	···	1.4 CIT	/-\$T-ZIP	MARY BOTH		424			
TITLE	VD	☐ DELETE	2.1 TITE	E	TRE KennekMiller		' U	Change	Addition	
NAME	orlandi, Michael e		2.2 NA	Æ						
STREET ADDRESS	98 VINEYARDS BLVD.		2.3 STR	EET ADDRES	ss V. Pro 11.					
CITY-ST-ZIP	NAPLES FL 33999		2. 4 CIT	Y-ST-ZIP	Meny VII HER	·				
TITLE	ST	☐ DELETE	3.1 TITE	.E	157		9	Change	Addition .	
NAME	Ferguson, Beulah		3.2 NA	AE .						
STREET ADDRESS	98 VINEYARDS BLVD.		3.3 STA	EET ADDRES	ss					
CITY-ST-ZIP	NAPLES FL	•	3.4. CIT	Y-ST-ZIP	Dominic 7	eem	unelo	)		
THTLE	D	DELETE	4.1 T(T)	.E				Change	Addition	
NAME	MORE, DONNA M.	•	4. 2 NA	ME	•					
STREET ADDRESS	98 VINEYARDS BLVD		4.3 STR	EET ADDRES	ss !					
CITY-ST-ZIP	NAPLES FL		4.4 CIT	Y-ST-ZIP						
TITLE		DELETE	5.1 TITI					Change	Addition	
NAME			5.2 NA)	Æ				-		
STREET ADDRESS				EET ADDRES	ss I					
CITY-ST-ZIP				r-st-zip						
TITLE		☐ DELETE	6.1 TITE					Change	Addition	
NAME			6.2 NAJ							
					e l					
STREET ADDRESS			1	EET ADDRES	»					
CITY-ST-ZIP	and that the information areas	tion with this fitting along not are		Y-ST-ZIP	n stated in Section 119.07(3)(i), Florid	. C	I durathan an			

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 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 and the same appears in Block 12 or Block 13 if changed are not that my name.

SIGNATURE: