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**May 06 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 # 708303 (3)

1. Corporation Name
CRYSTAL LAKE MOBILE HOMEOWNERS' ASSOCIATION, INC



Principal Place of Business 9301 49 STREET NORTH PINELLAS PARK FL 34666 US	Mailing Address 93187 2ND ST PINELLAS PARK FL 33782-5243 US
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2. Principal Place of Business 21	2a. Mailing Address 26 93089 5th St.	3. Date Incorporated or Qualified 12/29/1964	3a. Date of Last Report 03/13/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 70-8303621	Applied For Not Applicable
City & State 23	City & State 28 Pinellas Park Fl	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24	Country 25	Zip 29 33782	Country 30 USA
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

FRIZZELL, MARY L 93187 2ND ST PINELLAS PARK FL 34666-5243		81 Name Mary Skinner	82 Street Address (P.O. Box Number is Not Acceptable) 93089 5th street	83	84 City Pinellas Park	85 Zip Code FL 33782
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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 MARY SKINNER *Mary Skinner* April 23, 1997
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 PD	ALLISON, JACK	1.1 TITLE President	Mary Frizzell
STREET ADDRESS 93183 3RD ST		1.2 NAME	93187 5th St
CITY-ST-ZIP PINELLAS PARK FL	<input checked="" type="checkbox"/> DELETE	1.3 STREET ADDRESS	Pinellas Park Fl 33782
TITLE VPD	MCMAHON, BARBARA	1.4 CITY-ST-ZIP	
STREET ADDRESS 93078 6TH ST		2.1 TITLE Vice-President	Kay Garlow
CITY-ST-ZIP PINELLAS PARK FL	<input checked="" type="checkbox"/> DELETE	2.2 NAME	203 1st St
TITLE VPD	JOHNSON, VIRGINIA	2.3 STREET ADDRESS	Pinellas Park Fl 33782
STREET ADDRESS 93186 SECOND ST		2.4 CITY-ST-ZIP	
CITY-ST-ZIP PINELLAS PARK FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE Vice-President	Fern Lachance
TITLE DT	FRIZZELL, MARY	3.2 NAME	93084 6th Street
STREET ADDRESS 93187 2ND ST		3.3 STREET ADDRESS	pinellas Park Fl 33782
CITY-ST-ZIP PINELLAS PARK FL	<input checked="" type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	
TITLE DS	BAKER, JANET	4.1 TITLE Treasurer	Mary Skinner
STREET ADDRESS 93137 FOURTH ST		4.2 NAME	93089 5th St
CITY-ST-ZIP PINELLAS PARK FL	<input checked="" type="checkbox"/> DELETE	4.3 STREET ADDRESS	Pinellas Park
TITLE		4.4 CITY-ST-ZIP	
NAME		5.1 TITLE Secretary	Joan Woodland
STREET ADDRESS		5.2 NAME	93193 2nd St
CITY-ST-ZIP		5.3 STREET ADDRESS	Pinellas Park Fl 33782
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Mary Skinner* MARY SKINNER April 9, 1997 546-1714

CR2E037 (9/96)