


FILE NOW: FILING FEE IS \$61.25

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Feb 27, 1999 8:00 am
Secretary of State

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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 # 710112

1. Corporation Name
COLONIAL MANOR CIVIC AND RECREATIONAL ASSOCIATION, INC.

Principal Place of Business 3509 BLAYTON STREET NEW PORT RICHEY FL 34652 US	Mailing Address 3509 BLAYTON ST NEW PORT RICHEY FL 34652 US
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2. Principal Place of Business 21 3509 Blayton St. Suite, Apt. #, etc. 22 City & State 23 New Port Richey, FL Zip Country 24 34652 25 Pasco	2a. Mailing Address 26 3509 Blayton St. Suite, Apt. #, etc. 27 City & State 28 New Port Richey, FL Zip Country 29 34652 30 Pasco	3. Date Incorporated or Qualified 12/28/1965	4. FEI Number 59-6179171 Applied For Not Applicable
9. Name and Address of Current Registered Agent GALLAGHER, ED 3720 YELLOWBIRD ST COLONIAL HILLS NEW PORT RICHEY FL 34652		10. Name and Address of New Registered Agent 81 Name Edward Gallagher 82 Street Address (P.O. Box Number is Not Acceptable) 3720 Yellowbird Dr. 83 84 City New Port Richey, FL FL 85 Zip Code 34652	

5. Certificate of Status Desired \$8.75; Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D <input checked="" type="checkbox"/> DELETE	LAZUR, MARY LOU 3648 CANTRELL NEW PORT RICHEY FL	1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	President Charles Baxter 4715 Manor Drive New Port Richey, FL 34652
TITLE D <input checked="" type="checkbox"/> DELETE	LENTZ, FRANCES 5122 LOFTON ST NEW PORT RICHEY FL	2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Vice President Robert Hanson 5834 Emby Ave. New Port Richey, FL 34652
TITLE VP <input checked="" type="checkbox"/> DELETE	LEHR, FRANK 4841 MANOR DR NEW PORT RICHEY FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	Treasurer Edward Gallagher 3720 Yellowbird Dr. New Port Richey, FL 34652
TITLE S <input type="checkbox"/> DELETE	SMITH, CAROLYN 3548 CANTRELL ST NEW PORT RICHEY FL	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D <input type="checkbox"/> DELETE	ANDERSON, RUTH 3042 BIXLER CT HOLIDAY FL	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D <input checked="" type="checkbox"/> DELETE	FITCH, RUTH 1228 MARAVISTA DRIVE NEW PORT RICHEY FL	6.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	Director Barbara Padden 3542 Cantrell St. New Port Richey, FL 34652

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ SIGNATURE REQUIRED CAROLYN SMITH, SEC. 727-849-1113
 Date: 1-28-99 Daytime Phone #

CR2E037 (11/98)