

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 06 1996 8:00 am
Secretary of State

DOCUMENT # 714140 (1)
1. Corporation Name
COUNTRY CLUB TOWNHOUSE ESTATES PROPERTY OWNER ASSOCIATION, INC.



Principal Place of Business: 2052 COUNTRYSIDE CIR NO ORLANDO FL 32804 US
Mailing Address: 2052 COUNTRYSIDE CIR NO ORLANDO FL 32804 US

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 2005 Country Side Cir. S		26 2005 Country Side Cir. S.		02/21/1968		02/03/1995	
22 ORLANDO, FL.		27		4. FEI Number		Applied For	
23		28 Orlando, FL.		23-7089778		Not Applicable	
24 32804-6943		25 USA		29 32804-6943		30 USA	
5. Certificate of Status Desired		6. Election Campaign Financing		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		\$8.75 Additional Fee Required	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SNELLINGS, JAMES H 2052 COUNTRYSIDE CIR NO ORLANDO FL 32804				PRES. JOHN H. THOMPSON 2005 Country Side Circle South ORLANDO, FL. 32804-6943			
				FL Zip Code			

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: *John H. Thompson* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD QUIGLEY, VERNON F 2043 COUNTRYSIDE CIRCLE SOUTH ORLANDO FL	1.1 TITLE	D. Dot Lewis 794 County Lane ORLANDO, FL. 32804-6943
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D T.V.P. MCGEE, BARBARA 2031 COUNTRYSIDE CIR SO. ORLANDO FL	2.1 TITLE	D RODNEY KINCAID 2186 Country Side Cir N ORLANDO, FL. 32804-6943
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D MORGAN, DORIS 2002 COUNTRYSIDE CIRCLE SOUTH ORLANDO FL	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	SD GLICK, NANCY 2016 COUNTRY SIDE CIR, S ORLANDO, FL 00000	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D O'NEALL, A.E. 790 COUNTRY LANE ORLANDO FL	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D NEEL, ANNETTE 2151 COUNTRYSIDE COURT ORLANDO FL	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Barbara McGee* - BARBARA MCGEE 2-1-96 407-843-6109
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)