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Jan 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 718546 (5)

1. Corporation Name

PARK CITY HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8640 SW 20TH ST FT. LAUDERDALE FL 33324-1563 US	1620 SW 83RD AVE FT. LAUDERDALE FL 33324-4526 US

3. Date Incorporated or Qualified: 05/14/1970
3a. Date of Last Report: 02/02/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: 65-0100448 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TINNIRELLO, JOYCE I
1620 SW 83RD AVE
FT. LAUDERDALE FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BEAN, RAYMOND		1.2 NAME		
STREET ADDRESS	2260 SW 87TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ELLIOTT, HAMPTON		2.2 NAME		
STREET ADDRESS	1960 SW 83 AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	TINNIRELLO, JOYCE		3.2 NAME		
STREET ADDRESS	1620 SW 83 AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-ST-ZIP		
TITLE	S	☒ DELETE	4.1 TITLE	S	☒ Change ☐ Addition
NAME	DITTRICH, MARILUN		4.2 NAME	FLORENCE BEAN	
STREET ADDRESS	8708 SW 16 ST		4.3 STREET ADDRESS	2260 S.W. 87th Ave	
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33324	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	BAINES, ALBERT		5.2 NAME		
STREET ADDRESS	2020 SW 83 TERR		5.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	ZYSK, THEODORE		6.2 NAME		
STREET ADDRESS	1961 SW 84TH AVE		6.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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: JOYCE TINNIRELLO Joyce Tinnirello 1-9-97 954-474-4154
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0037119