SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

FILED
Jul 23 1998 8:00am
Secretary of State

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 33324-1563 US

3. Date Incorporated or Qualified: 05/14/1970

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

2. Principal Place of Business	2a. Mailing Address
21	26 8640 SW 20 Th ST.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 FT. LAUDERDALE
Zip 24 / Country 25	Zip 29 33324-1563 / Country 30 USA

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

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☑ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TINNIRELLO, JOYCE I 1620 SW 83RD AVE FT. LAUDERDALE FL 33324	81 Name: MYERS, ROBERT M. 82 Street Address (P.O. Box Number is Not Acceptable): 1630 SW 83 RD TERRACE 83 84 City: FT. LAUDERDALE FL 85 Zip Code: 33324

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: Robert M. Myers — ROBERT M. MYERS, PRESIDENT — 7-15-98
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	P	☑ DELETE	1.1 TITLE	P	☐ Change ☑ Addition
NAME	BEAN, RAYMOND		1.2 NAME	MYERS, ROBERT M.	
STREET ADDRESS	2280 SW 87TH AVE		1.3 STREET ADDRESS	1630 SW 83 RD TERRACE	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33324	
TITLE	VP	☑ DELETE	2.1 TITLE	VP	☐ Change ☑ Addition
NAME	ELLIOTT, HAMPTON		2.2 NAME	DUNHAM, SALLY	
STREET ADDRESS	1980 SW 83 AVE		2.3 STREET ADDRESS	2356 SW 84 AVENUE	
CITY-ST-ZIP	FT LAUDERDALE FL		2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33324	
TITLE	T	☑ DELETE	3.1 TITLE	S	☐ Change ☑ Addition
NAME	TINNIRELLO, JOYCE		3.2 NAME	STEWART, CAROLE	
STREET ADDRESS	1620 SW 83 AVE		3.3 STREET ADDRESS	8601 SW 18 ST.	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33324	
TITLE	S	☑ DELETE	4.1 TITLE	D	☐ Change ☑ Addition
NAME	FLORENCE BEAN		4.2 NAME	TILLEY, BARBARA ANN	
STREET ADDRESS	2280 S.W. 87TH AVE.		4.3 STREET ADDRESS	1941 SW 87 TH AVENUE	
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33324	
TITLE	D	☑ DELETE	5.1 TITLE	D	☐ Change ☑ Addition
NAME	BAINES, ALBERT		5.2 NAME	HARDIN, GARY	
STREET ADDRESS	2020 SW 83 TERR		5.3 STREET ADDRESS	1920 SW 84 AVENUE	
CITY-ST-ZIP	FT. LAUDERDALE FL		5.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33324	
TITLE	D	☐ DELETE	6.1 TITLE	T	☑ Change ☐ Addition
NAME	ZYSK, THEODORE		6.2 NAME		
STREET ADDRESS	1981 SW 84TH AVE		6.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		6.4 CITY-ST-ZIP		

CR2E037 (5/98)

14. I 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: Robert M. Myers — ROBERT M. MYERS — 7-15-98 — (954) 473-9277
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #