721378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

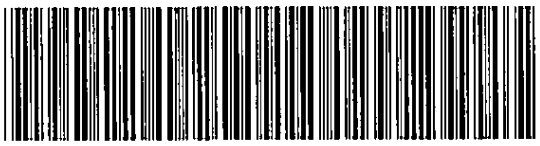
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800367429328

NP 21378

OXAHATCHEE LANDOWNERS ASSOCIATION, INC.

NP
21378

FILED IN OFFICE OF DEPARTMENT OF STATE, STATE OF FLORIDA

by Iwa, on 7/20/71

RICHARD (DICK) STONE
SECRETARY OF STATE

corp-1

JOS. D. FARISH
JOS. D. FARISH, JR.
HUBERT R. LINDSEY
F. KENDALL BLINKMAN
ROBERT L. TAYLOR
ROSEMARY BARNETT

DENCO BUILDING
316 FIRST STREET
WEST PALM BEACH, FLORIDA 33402

TELEPHONE (305) 833-7766

CABLE ADDRESS
"DENCO"

July 16, 1971

Honorable Richard Stone
Secretary of State
Capitol Building
Tallahassee, Florida

RE: Incorporation of Loxahatchee Landowners Association, a non-profit corporation

Dear Sir:

Enclosed are the original and duplicate copy of the Articles of Incorporation of this proposed non-profit corporation. The duplicate is a xerox copy of the original. Please endorse your approval of the Articles of Incorporation on the duplicate copy, certify and return to me.

I have enclosed our firm check no. 24211 in the amount of $30.00 payable to your order to cover the filing fee, and our firm check no. 24223 in the amount of $10.00 for the certified copy of the Articles of Incorporation.

You will note that Article XI designates the resident agent.

PRIVILEGE TAX	
C. TAX	
FILING	30.00
C. COPY	10.00
R. A. FEE	
P. COPY	
SEARCH	
TOTAL	40.00
BALANCE DUE	
REFUND	

Yours very truly,

FARISH & FARISH

BY: Hubert R. Lindsey

HRL:SC

Enclosures (4)

cc: Mr. LeRoy J. Palmer

LeRoy J. Palmer

Walter Goding

Beatrice Swain

ARTICLES OF INCORPORATION

OF

LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.
(A Corporation Not for Profit)

We, the undersigned, with others being desirous of forming a corporation, not for profit, under the provisions of Ch. 617 of the Florida Statutes, do agree to the following:

ARTICLE I. NAME

The name of this corporation is Loxahatchee Landowners Association, Inc.

ARTICLE II. PURPOSES

The general nature of the objects and purposes of this corporation shall be: To organize the land owners of that section of Palm Beach County known as Loxahatchee Groves for the purpose of providing civic improvements for Loxahatchee Groves.

ARTICLE III. QUALIFICATION OF MEMBERS

The membership of this corporation shall constitute all persons hereinafter named as subscribers, and such other persons as, from time to time hereafter, may become members, in the manner provided in the by-laws.

ARTICLE IV. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. SUBSCRIBERS

The names and residences of the subscribers to these articles are:

NAME	RESIDENCE
LeRoy J. Palmer	Bykota Ranch, North Road Post Office Box 325 Loxahatchee, Florida 33470
Walter Goding	North Road Loxahatchee, Florida 33470
Beatrice Swain	1100 "D" Road Loxahatchee, Florida 33470

ARTICLE VI. OFFICERS

Section 1. The officers of the corporation shall be a President, such number of Vice Presidents, a Secretary, a Treasurer, and such other officers as may be provided in the by-laws.

Section 2. The names of the persons who are to serve as officers of the corporation until the first annual meeting of the corporation are:

OFFICE	NAME
President	LeRoy J. Palmer
First Vice President	Walter Goding
Treasurer	Cora Dunlap
Secretary	Pam Wheeler

Section 3. The officers shall be elected at the annual meeting of the corporation or as provided in the by-laws.

ARTICLE VII. BOARD OF DIRECTORS

Section 1. This corporation shall have five (5) directors initially, one of which shall be the President of the corporation. The number of directors may be increased from time to time by the by-laws, but shall never be less than three (3).

Section 2. The Board of Directors shall be members of the corporation.

Section 3. Members of the Board of Directors shall be elected and hold office in accordance with the by-laws.

Section 4. The names and addresses of the persons who are to serve as directors for the ensuing year, or until the first annual meeting of the corporation, are:

NAME	ADDRESS
James P. Hodges	Collection Canal Road Loxahatchee, Florida 33470
Jack E. Kazee	12605 Kazee Road Loxahatchee, Florida 33470
Pat Murphy	245 Folsom Road Loxahatchee, Florida 33470
Tom L. Bensel	13475 Southern Boulevard Loxahatchee, Florida 33470

LeRoy J. Palmer
Post Office Box 325
Loxahatchee, Florida 33470

ARTICLE VIII. BY-LAWS

Section 1. The membership of this corporation may provide such by-laws for the conduct of its business and the carrying out of its purposes as they may deem necessary from time to time.

Section 2. Upon proper notice the by-laws may be amended, altered or rescinded by a majority vote of those members of the corporation present at any regular meeting or any special meeting called for that purpose as provided in the by-laws.

ARTICLE IX. AMENDMENTS

Section 1. These Articles of Incorporation may be amended at a special meeting of the membership called for that purpose by a three-fourths majority vote of those present.

Section 2. Amendments may also be made at a regular meeting of the membership upon notice given, as provided by the by-laws, of intention to submit such amendments.

ARTICLE X. LOCATION

The location of this corporation shall be at Tangerine Drive, Post Office Box 96, Loxahatchee, County of Palm Beach, State of Florida.

ARTICLE XI. DESIGNATION OF RESIDENT AGENT

The Resident Agent of this non-profit corporation is Hubert R. Lindsey, of the Law Firm of Farish & Farish, Denco Building, 316 First Street, West Palm Beach, Florida.

IN WITNESS WHEREOF, we, the undersigned subscribing incorporators, have hereunto set our hands and seals, this the 7th day of January, A. D., 1971, for the purpose of forming this corporation not for profit under the laws of the State of Florida.

LeRoy J. Palmer

Walter Goding

Beatrice Swain

STATE OF FLORIDA

COUNTY OF PALM BEACH . . . .

Before me, a Notary Public, duly authorized in the State and County aforesaid to take acknowledgements, personally appeared LeRoy J. Palmer, Walter Goding and Beatrice Swain, to me known to be the persons described as subscribers in and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed and subscribed to these Articles of Incorporation.

Witness my hand and official seal in the County and State aforesaid this the 28 day of June, A. D., 1971.

Notary Public, State of Florida at Large

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JAN. 27, 1975

RICHARD (DICK) STONE
SECRETARY OF STATE
The Capitol
Tallahassee, Florida 32304

State of Florida
Department of State
ANNUAL REPORT
for Corporations and Other Entities

BLK. RT.
U.S. POSTAGE
PAID
MIAMI, FLA.
PERMIT NO. 616

ADDRESS CORRECTION
REQUESTED
DATE DUE: JAN. 1, 1973
DATE DELINQUENT: MAR. 1, 1973

Please refer to this number for future correspondence regarding this corporation

N 721376-00-00 07/20/71
A LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 96
C LOXAHATCHEE FLA 33470

FEB-6-73 1 276 ********2.00

PLEASE TYPE

C11652

CHANGE MAILING ADDRESS TO: _____ Zip _____

1. Loxahatchee Landowners Association (Exact Corporate Name) 2. _____ Fed. Emp. I.D. No.

3. Tangerine Dr. P. O Box 96 Loxahatchee Palm Beach Fla 33470
(Street Address of Principal Office in Fla.) (City) (County) (State) (Zip)

	(Officers Names)	(Title)	(Street Address)	(City)	(State)
4. (a)	Cecil Conley	President	PO Box 26	Loxahatchee	Fla
(b)	Walter Coding	Vice President	13912 North Rd	Loxahatchee	Fla
(c)	Pam Wheeler	Secretary	27288 Road	Loxahatchee	Fla
(d)	Arthur Robinson	Treasurer	PO Box 103	Loxahatchee	Fla
	(Directors, Trustees, Managers)		(Street Address)	(City)	(State)
5. (a)	Eleanor Hope		PO Box 178	Loxahatchee	Fla
(b)	Pam Wheeler		27288 Rd	Loxahatchee	Fla
(c)	Walter Coding		13912 North Rd	Loxahatchee	Fla
(d)	Jim Bennett		PO Box 69	Loxahatchee	Fla
6.	(Florida Resident Agent Name) Pamela E. Wheeler		(Florida Street Address) 27288 Rd	(City) Loxahatchee	(Zip) 33470

7. General Nature of Business (See page 2) 8 6 4 1

8. Date Formed or Incorporated 7/26/71 (MO DA YR)

9. If Foreign Corporation, Date Qualified in Florida ___/___/___ (MO DA YR)

10. Capital Stock (or number and book value of all certificates of interest or participation):

Class or Type	Par or Stated Value	Shares Authorized	SHARES ISSUED Number	Book Value
(a)	NONE			$
(b)				$
(c)				$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined _____

12. Fiscal close of accounting period 9/31 (MO DA)

13. I/WE declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31, 1972 have been paid as required under Chapter 201, Florida Statutes, and I/WE further declare that this report is true and correct.

(Corporate Seal)
Attest: Pamela E. Wheeler
Secretary or Assistant Secretary

Loxahatchee Landowners Association
(Corporate Name)
By: X Cecil Conley, Pres.
President or Vice President

Return Original (with Filing Fee) to DEPARTMENT OF STATE
DRAWER 18
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

Corp - AR73

READ INSTRUCTIONS ON BACK

FILING FEE PER PROFIT ENTITY $5.00
PER NON-PROFIT ENTITY $2.00

RICHARD (DICK) STONE
Secretary of State
THE CAPITOL
TALLAHASSEE, FLA.
32304

STATE OF FLORIDA
DEPARTMENT OF STATE

PRIVILEGE TAX RETURN

FOR CORPORATIONS & OTHER ENTITIES

BLK. RT.
U.S. POSTAGE
PAID
TALLAHASSEE, FLA.
PERMIT #88

721378-60-00 07/20/71

ADDRESS CORRECTION REQUESTED
32 0453

LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

MAR 13-72—2 97400 ****2.00

DATE DUE: JAN. 1, 1972
DATE DELINQUENT: MAR. 1, 1972
PLEASE TYPE

Change Mailing Address to: _____ Zip _____

READ INSTRUCTIONS ON BACK

(Exact Corporate Name) — Fed. Emp. I.D. No.

1. Loxahatchee Landowners Association — 2.

(Street Address of Principal Office in Fla.) — (City) — (County) — (State) — (Zip)

3. P.O Box 96 (Tangerine Rd) — Loxahatchee — Palm Beach — Florida — 33470

(Officers Name)	(Title)	(Street Address)	(City)
4.(a) William Mann	President	Box 163 (14339 Collecting)	Loxahatchee
(b) Walter Goding	Vice President	13812 North Rd	Loxahatchee
(c) Dolores Farley	Secretary	2660 'F' Rd	Loxahatchee
(d) Fannie Swaim	Treasurer	1682 'B' Rd	Loxahatchee

(Directors, Trustees, Managers)	(Street Address)	(City)
5.(a) S.P. Hodges	Box 204	Loxahatchee
(b) Pamela Wheeler	P.O. Box 65 (2728 'B' Rd)	Loxahatchee
(c) Tom Bensel	Box 68	Loxahatchee
(d) H.G. Murphy	Box 328	Loxahatchee

(Resident Agent Name)	(Street Address)	(City)
6.		

READ INSTRUCTIONS ON BACK

7. General Nature of Business: Landowners Organization
8. Date Formed or Incorporated: 7/20/71
9. If Foreign Corporation, Date Qualified in Florida: ___/___/___

10. Capital Stock (or number and book value of all certificates of interest or participation):

	Class or Type	Par or Stated Value	Shares Authorized	Number	Book Value
(a)	NONE				$
(b)					$
(c)					$
(d)					$
(e)	Total Book Value of Stock (Certificates) Issued				$

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined: Non-profit organization

12. Close of annual accounting period for this return: 9/30/71.

13. I/We declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31 have been paid as required under Chapter 201, Florida Statutes, and I/We further declare that this return is true and correct.

(Corporate Seal)
Attest: Dolores Farley
Secretary or Assistant Secretary

Loxahatchee Landowners Association
(Corporate Name)
By: W. Mann
President or Vice President

PRIVILEGE TAX PROFIT ENTITIES $5.00 NON-PROFIT ENTITIES $2.00

PRIVILEGE TAX PROFIT ENTITIES $5.00 NON-PROFIT ENTITIES $2.00

Return Original (with Tax Payment) to DEPARTMENT OF STATE
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

ANNUAL REPORT
FOR CORPORATIONS AND OTHER ENTITIES

(1) CHARTER NUMBER 721370 (2) DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA. 07/26/1971

VALIDATION AREA - DO NOT WRITE IN THIS SPACE
MAR 11-74 1 130*******2.00

SECRETARY OF STATE
RICHARD (DICK) STONE
P.O. BOX 6327
TALLAHASSEE, FLA. 32301

DUE JAN 1, 1974 DELINQUENT JULY 1, 1974

PAGE 1

(3) EXACT NAME: LUXAHATCHEE LANDOWNERS ASSOCIATION, INC.

(4) FED. EMP. I.D. NO. 7?-???????? (5) SICC 8641 (SEE PAGE 4)

(6) RESIDENT AGENT: WHEELER, PAMELA L
2720 G RD
LUXAHATCHEE, FL 33470

(7) OFFICERS/DIRECTORS NAMES — CITY / STATE

CONLEY, CECIL	LUXAHATCHEE, FL	P
GODING, WALTER	LUXAHATCHEE, FL	VP
WHEELER, PAM	LUXAHATCHEE, FL	D
HOPP, ELEANOR same	LUXAHATCHEE, FL	D
WHEELER, PAM	LUXAHATCHEE, FL	D
GODING, WALTER	LUXAHATCHEE, FL	D

(8) FISCAL CLOSE OF ACCOUNTING PERIOD 09

(9) MAILING ADDRESS:
721370
LUXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P.O. BOX 96
LUXAHATCHEE FLA 33470

(10) PRIMARY STOCK
AUTH. STK. PAR VALUE

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE Cecil Conley

(11) TITLE Pres TEL NO 686-5612

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

(4a) None FED. EMPLOYER ID. NO

(5a) SICC 8641 (SEE PAGE 4)

(6a) RESIDENT AGENT CHANGE

(7a)

OFFICERS/DIRECTORS	STREET ADDRESS	TITLE
Conley, Cecil	C Rd Lot	P
Roe, Donald	C Rd Lot	VP
Hillyard, David	Collecting Canal	D
Wilson, Clifford	B Rd Lot	D
Willard, Pat	Collecting Canal	S
Wilson, Marian	B Rd	T

(7b) IF ADDITIONAL OFFICERS/DIRECTORS, ATTACH ADDENDUM SHEET

(8a) FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH) 09

(9a)

(9b) STREET Tangerine Dr.
ADDRESS P.O. Box 96

(10a) CAPITAL STOCK (OR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)

	CLASS OR TYPE	PAR NO. PAR OR STATED VALUE	SHARES AUTHORIZED	NUMBER PAID VALUE
(1)	NONE			$
(2)				$

(10b) IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

(12) RESIDENT AGENT SIGNATURE (IF CHANGED FROM NO. 6 ABOVE)

PLEASE READ INSTRUCTIONS ON PAGE 2.
FILING FEES $5.00 PROFIT ENTITY $2.00 NON PROFIT

ANNUAL FILING FEE
$ 50 - PROFIT CORP
$ 20 - NON PROFIT CORP

CORPORATION ANNUAL REPORT

SEP -2-75

DUE - JAN. 1 DELINQUENT - AFTER 1 VALIDATION AREA - DO NOT WRITE IN THIS SPACE

MAKE THIS FORM & FILING FEE TO:

SECRETARY OF STATE
THE CAPITOL
TALLAHASSEE, FLORIDA
32304

(1) 721378 CHARTER NUMBER

(2) 07/20/1971 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA

(3) SIC (SEE ENCLOSED LIST) 3641

(3a) CHANGE TO

1976 YEAR OF LAST REPORT FILED IN THIS OFFICE

1975 YEAR(S) THIS REPORT COVERS

(4) FED EMPLOYER ID NO

(4a) CHANGE TO

(5) FISCAL CLOSE OF ACCOUNTING PERIOD (MO) 09

(5a) CHANGE TO

(6) EXACT NAME: LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE — FOR DATA ON USE ONLY

AG 9-22-75

(7) IF "RESIDENT AGENT" AND/OR ADDRESS IS DIFFERENT, WRITE THIS OFFICE AT THE ABOVE ADDRESS FOR PROPER FORMS

RESIDENT AGENT AND STREET ADDRESS: WHEELER, PAMELA F
2728 B RD
LOXAHATCHEE, FL 33470

PLEASE READ INSTRUCTIONS ON BACK

NOTICE: IN THE FUTURE, ALL MAIL WILL BE ADDRESSED TO THE PHYSICAL STREET ADDRESS OF CORPORATION TO COMPLY WITH THIS REQUIREMENT, PLEASE CHANGE THE MAILING ADDRESS TO REFLECT THE PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED

(8) 721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TARGET LINE DR
ADDRESS P O BOX 95
LOXAHATCHEE FLA 33470

(8a) CHANGE TO

(8a) P O BOX

(9) OFFICERS/DIRECTORS

NAMES	STREET ADDRESS	CITY / STATE	TITLE(S)	
CURLEY, CECIL	—	LOXAHATCHEE, FL	PRES	
RUE, DONALD		LOXAHATCHEE, FL	V.P.	
HILLIARD, PAT		LOXAHATCHEE, FL	SEC	
HILLIARD, DAVID		LOXAHATCHEE, FL	DIR	
WILSON, CLIFFORD		LOXAHATCHEE, FL	DIR	

STRIKE THROUGH INCORRECT ENTRY AND TYPE CORRECT INFORMATION IN SPACE PROVIDED IMMEDIATELY BELOW LINE

CAPITAL STOCK

(10)

(10a) CAPITAL STOCK (FOR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)

CLASS OR TYPE	PAR NO PAR OR STATED VALUE	SHARES AUTHORIZED	NUMBER BOOK VALUE
(1)			$
(2)			$

IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE [signature]

TITLE Treasurer TEL NO 793-4978

DATE July 30, 1975

CORP-AR75

REPORT IS DUE: JAN. 1
DELINQUENT: JULY 1

Pamela E. Wheeler
P. O. Box 65, Loxahatchee, Fla. 33470

July 3, [illegible]

Sirs,

Enclosed is a check for $2.00 for this report. We have had an election [illegible] the [illegible] new officers the [illegible] but are not correct. This is the correct [illegible]

President - Eleanor [illegible] Loxahatchee, Fla.
Vice President - James [illegible] "
Secretary - Diane Longhurst "
Treasurer - Pamela E. Wheeler "
B of D - Ruth [illegible] "
B of D - Sally [illegible]

All other information is correct

Thank you
Pamela Wheeler

CORPORATION ANNUAL REPORT

$5.00 PROFIT CORP
$5.00 NON PROFIT CORP ✓

DUE JANUARY 1 — DELINQUENT JULY 1

FILED 11-26 1 0804

VALIDATION/FILING — DO NOT WRITE IN THIS SPACE

REPORT THIS ENTITY'S RECORDS TO:

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
THE CAPITOL
TALLAHASSEE, FLORIDA
32301

(1) 721378 — CHARTER NUMBER — (U)

(2) 07/20/1971 — DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA

(3) SICC (SEE INSTRUCTIONS BACK) 8041

(3a) CHANGE TO:

1975 — YEAR OF LAST REPORT FILED IN THIS OFFICE

1976 — YEAR(S) THIS REPORT COVERS

(4) FED EMPLOYER ID NO

(4a) CHANGE TO

PLEASE READ INSTRUCTIONS ON BACK

(5) EXACT NAME: LOXAHATCHEE LANDOWNERS ASSOCIATION, INC

(6) ADDRESS (STREET ADDRESS OR RFD. POST OFFICE BOX ALONE WILL NOT BE ACCEPTABLE)

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 75
LOXAHATCHEE FLA 33470

(6a) STREET ADDRESS CHANGE

(7) REGISTERED AGENT AND STREET ADDRESS

[illegible]
2724 B RD
LOXAHATCHEE, FL 33470

(7a) REGISTERED AGENT NAME CHANGE
AND/OR ADDRESS CHANGE
INCLUDE REGISTERED OFFICE ADDRESS

(8) TYPE CORRECTIONS & SPACE ABOVED BELOW. STRIKE THROUGH INCORRECT ENTRIES. CORRECT ONLY TO BE LEGIBLE. TITLES MUST BE SHOWN

NAMES OF ALL OFFICERS AND DIRECTORS	STREET ADDRESS	CITY / STATE	TITLES MUST BE SHOWN	
[illegible]		LOXAHATCHEE, FL	P.D.S.	
Eleanor Hope	Okeechobee Rd	"	"	
[illegible]		LOXAHATCHEE, FL	V.P.	
Pamela Clarke	B Rd	"	"	
[illegible]		LOXAHATCHEE, FL	SEC	
Cathy Cotton	B Rd	"	"	
[illegible]		LOXAHATCHEE, FL	VTR	
Leslie Ballard	D Rd	"	"	
[illegible]		LOXAHATCHEE, FL	DTR	
Peter Eberhardt	161st Terrace	" "	"	
Ruth [illegible]	Tangerine Dr	Lox	Tres	

CORPORATION USE ONLY

APPROVED AND FILED
MAY 3 2 43 PM 1976
FLORIDA DEPARTMENT OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

5/3/76

I CERTIFY THAT I AM AN OFFICER OF THIS CORPORATION EMPOWERED TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 607, FLORIDA STATUTES. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OATH.

SIGNATURE Pamela S Clarke

TITLE Vice President TEL NO 793 1692

DATE [illegible] 1976

CORP-AR7S

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Bruce A. Smathers
Secretary of State

Form COR 620

CORPORATION ANNUAL REPORT

1977

THIS REPORT MUST BE ACCOMPANIED BY A $5 FEE

Mar 10 10 39 AM 1977
FLA. DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA
FCR 11-77 2 006 ***** 5.00

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1. Name and Address of Corporation Principal Office:

721378 LOXAHATCHEE
LANDOWNERS ASSOCIATION, INC.
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
07/20/1971		1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
CARPENTER, JOSEPH ~~HOPE, PLANGE~~	PRES		1549 "D" Road ~~OKEECHOBEE RD~~	LOXAHATCHEE, FL
UDELL, JAMES ~~WELLS, RAY~~	V.P.		2893 "E" Road ~~B ROAD~~	LOXAHATCHEE, FL
GOODROAD, PHYLLIS ~~ORTON, CATHY~~	SEC		13283 Marcella Blvd ~~B ROAD~~	LOXAHATCHEE, FL
WHEELER, PAMELA ~~BALLARD, HALLY~~		DIR	2728 "B" Road ~~B ROAD~~	LOXAHATCHEE, FL
SWAIM, FANNIE ~~EBERHARDT, PETER~~		DIR	1682 "B" Road ~~161 TERRACE~~	LOXAHATCHEE, FL
ROBINSON, RUTH		~~DIR~~ TREAS.	TANGERINE DR	LOXAHATCHEE, FL
WORSHAM, HAMES		DIR.	"P" Road	LOXAHATCHEE, FL.

7. Registered Agent Information

Name: ~~WHEELER, PAMELA B~~ | Street Address (Do NOT Use P.O. Box Number): ~~2728 B RD~~

City, State and Zip Code: ~~LOXAHATCHEE, FL 33470~~

If you wish to change Registered Agent on this form, enter all new information here ▶

Name: CARPENTER, JOSEPH | Street Address (Do NOT Use P.O. Box Number): 1549 "D" Road

City, State and Zip Code: LOXAHATCHEE, FLORIDA 33470

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

3-10-77

Typed Name of Signing Officer	Title	Telephone Number
CARPENTER, JOSEPH	President	793-0452

Signature	Date
Joseph Carpenter	1/20/77

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

corp-32

NP # 21,378

LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.

(XX) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: 7/20/71 By: Hubert R. Lindsey
W. Palm Beach, Fla.

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE (Form COR 8200 12-1-77)

FILED
APR 18 9 00 AM 1978
FLORIDA DEPT. OF STATE
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office:

721378 LOXAHATCHEE
LANDOWNERS ASSOCIATION, INC.
TANGERINE DR.
P O BOX 96
LOXAHATCHEE FLA 33470

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address:

P.O. Box No.: APR 18-78 ** 105300 **** 10.00

City:

State: Zip Code:

3. Date Incorporated or Qualified To Do Business In Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
07/20/1971		1977

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
CARPENTER, JOSEPH	PRES		1549 "D" ROAD	LOXAHATCHEE, FL
UDELL, JAMES	V.P.		2899 "E" ROAD	LOXAHATCHEE, FL
~~WHEELER, PAMELA~~ SEC	SEC		2728 "D" Road	LOXAHATCHEE, FL
HOPE, ELEANOR ~~WHEELER, PAMELA~~	DIR.		OKEECHOBEE ROAD	LOXAHATCHEE, FL
NORSHAM, JAMES	DIR.		"E" ROAD	LOXAHATCHEE, FL
ROBINSON, RUTH	TREAS		TANGERINE DR.	LOXAHATCHEE, FL
YEARTY, VIRGINIA	DIR.		2980 "F"	LOXAHATCHEE, FL

7. Registered Agent Information

Name: CARPENTER, JOSEPH
Street Address (Do NOT Use P.O. Box Number): 1549 "D" ROAD
City, State and Zip Code: LOXAHATCHEE, FL 33470

If you wish to change Registered Agent on this form, enter all new information here ▶

Name:
Street Address (Do NOT Use P.O. Box Number):
City, State and Zip Code:

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Title Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer: Carpenter, Joseph
Title: President
Telephone Number: 793-9452
Signature: Joseph E Carpenter
Date:

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED
[illegible]
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office.

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O Box No

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 7/20/1971

4. Federal Employer Identification Number (FEIN):

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
UDELL, JAMES ~~CARPENTER, JOSEPH~~	P	2893 "E" Road 1549 D ROAD	LOXAHATCHEE, FL
LONGHURST, GREGORY ~~UDELL, JAMES~~	V	P. O. BOX 125 2893 E ROAD	LOXAHATCHEE, FL
HOPE, ELEANOR E. ~~WHEELER, PAMELA~~	S	P. O. Drawer #7 2728 B ROAD	LOXAHATCHEE, FL
Pryel, KATHIE ~~[illegible]~~	D	1363 "P" ROAD OKEECHOBEE ROAD	LOXAHATCHEE, FL
WIGGINS, CLIFFORD ~~FORSHAM, JAMES~~	D	14591 Gruber Lane F ROAD	LOXAHATCHEE, FL
ROBINSON, RUTH	T	TANGERINE DR	LOXAHATCHEE, FL
KEEHR, MARILYN	D	2762 "F" Road	Loxahatchee, Fl.

7. Registered Agent Information

Name
~~CARPENTER, JOSEPH~~ Udell, James

Street Address (Do NOT Use P.O. Box Number)
~~1549 D ROAD~~ 2893 "E" Road

City, State and Zip Code
LOXAHATCHEE, FL 33470

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

AH 5/23/79

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer: JAMES UDELL

Title: PRESIDENT

Telephone Number: 793-[illegible]

Signature: James Udell

Date

Form COR [illegible] Rev. 10/77/8

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

04-11-79 2 7 1279 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1 Name and Address of Corporation Principal Office

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O LOX RD
LOXAHATCHEE FLA 33470

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2 Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address
P.O. Box No.
City
State
Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 7/22/1977

4 Federal Employer Identification Number (FEIN): N/A

5 Date of Last Report: 1979

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number(s))	City and State
GILL, PAMELA, MRS.	P	1372 15th. Ln N.	LOXAHATCHEE, FL
Keehr, Marilyn Mrs.	V	2762 "E" Rd.	LOXAHATCHEE, FL
HOPE, ELEANOR L.	S	P.O. DRAWER #7/NA	LOXAHATCHEE, FL
Carpenter, Jean, Mrs.	D	1549 "D" Rd	LOXAHATCHEE, FL
Yearty Dan	D	2988 "E" RD.	LOXAHATCHEE, FL
ROBINSON, RUTH	T	TANGERINE DR	LOXAHATCHEE, FL
Rich, Ernest	D	2770 "E" Rd.	LOXAHATCHEE, FL.

7 Registered Agent Information

Name: GILL, MRS. PAMELA
Street Address (Do NOT Use P.O. Box Number): 1372 15th. Ln. N
City, State and Zip Code: LOXAHATCHEE, FL 33470

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8 **See signature restrictions under Instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
Pamela E. Gill	President	795-2530

Signature: Pamela E Gill

Date: 3-20-80

721378 05-22-80 7 918 10.00

DO NOT WRITE IN THIS SPACE

6/2/80

(Form COR 620) Rev. 12/15/79

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

FILED
OCT 12 11 37 AM '81
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

2. Enter Change of Address or Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address
P.O. Box No.
City
State Zip Code

3. Date of Incorporation or Qualification in Florida
7/20/1971

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report
1980

Name and Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City, State and Zip Code
GILL, PAMELA MRS.	VP	13720 15TH LANE N	LOXAHATCHEE, FL
~~AGEHR, MARILYN MRS.~~	~~S~~	2762 F RD.	LOXAHATCHEE, FL
HOPE, ELEANOR D.	P	14965 Okeechobee Rd P.O. Box 96	LOXAHATCHEE, FL
CARPENTER, JEAN MRS.	S	1549 D RD	LOXAHATCHEE, FL
YEARTY, ~~Bob~~ Virginia	D	2986 F RD	LOXAHATCHEE, FL
ROBINSON, RUTH	T	TANGERINE DR	LOXAHATCHEE, FL
Morton, Carol Mrs.	D	14955 Cypress Ln	Loxahatchee, Fl. 33470

Registered Agent Information

Name
~~GILL, PAMELA MRS.~~ Mrs. Eleanor Hope

Street Address (Do NOT Use P.O. Box Number)
~~13720 15TH LANE NORTH~~ 14965 Okeechobee Road

City, State and Zip Code
LOXAHATCHEE, FL 33470

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with fee of $3

See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Typed Name of Signing Officer
Mrs. Eleanor Hope

Title
President

Telephone Number
793-2652

Signature

Date
Oct. 2, 1981

DO NOT WRITE IN THIS SPACE

Rev 06/18/81

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
Ron Levitt
Assistant Secretary of State

Telephone Number:
904/488-9840

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

FIRST: The name of the corporation is [illegible]

SECOND: The address of its present registered office is Tarrapine Drive P. O. Box 86 Loxahatchee, Florida 33470

THIRD: The address to which its registered office is to be changed is Same as above

FOURTH: The name of its present registered agent is Mrs. Eleanor D. Rose

FIFTH: The name of its successor registered agent is Rose (Eleanor) Mrs. (Mrs.) Before that it was Mrs. Pamela Gill

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of directors.

Dated January 15, 1981.

LOXAHATCHEE [illegible] ASSOCIATION, INC.
(exact corporate name)

✓SIGNATURE Pamela E. Gill
(President or Vice-President)

DATE 5-19-81

FILING FEE: $3.00

✓SIGNATURE [illegible]
(Registered Agent)

DATE 5-19-81

ebw 06/18/87

CER 114 Rev 1-80

FLORIDA-State of the Arts

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1982

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

George Firestone
Secretary of State

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

MAY 20 2 05 PM 1982

Read Notice and Instructions on Other Side Before Making Entries.
Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address:
P.O. Box No.:
City:
State: Zip Code:

3. Date Incorporated or Qualified to Do Business in Florida: 07/20/1971

4. Federal EIN# (or Identification Number if any):

5. Date of Last Report: 06/18/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
GILL, PAMELA MRS.	Pres.	1372-15TH LANE N	LOXAHATCHEE, FL
Kuehr, Marilyn Mrs.	V. P.	2762 "F" Rd.,	LOXAHATCHEE, FL
CARPENTER, JEAN MRS.	D.	1549 "D" RD	LOXAHATCHEE, FL
YEARTY, VIRGINIA	S.	2988 "F" RD	LOXAHATCHEE, FL
ROBINSON, RUTH	T	TANGERINE DR 233	LOXAHATCHEE, FL
Poore, Tom	D.	13154 24th. Court,	Loxahatchee, Fl.

Registered Agent Information

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

Name:
Street Address (DO NOT Use P.O. Box Number):
City, State and Zip Code:

I hereby certify that the principal office of the corporation listed above is changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors. No Change

SIGNATURE Eleanor Hope
Registered Agent Accepting Appointment

DATE 5-11-82

$3.00 additional fee required for Registered Agent changes.

9. See signature instructions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand That By Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature: Pamela Gill
Date: 4/5/82

Typed Name of Signing Officer: Pamela Gill
Title: President
Telephone Number: 793-25-72 793-2530

CORP 625 (11/81)

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

FILED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION INC
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

07/20/1971 05/28/1982

YEARTY, VIRGINIA	P	2988 F RD	LOXAHATCHEE, FL	0000
POORE, TOM	D	13154 24TH COURT	LOXAHATCHEE, FL	0000
ROBINSON, RUTH	T	TANGERINE DR 233	LOXAHATCHEE, FL	0000
~~KEENO, MARILYN, MRS~~	~~V~~	~~2263 F RD~~	~~LOXAHATCHEE, FL~~	0000
CARPENTER, JEAN MRS	D	1549 D RD	LOXAHATCHEE, FL	0000
GILL, PAMELA MRS	P	1372 15TH LANE N	LOXAHATCHEE, FL	0000
Maraj, Owen	S.	455 Polaris Road	Loxahatchee, FL.	

Registered Agent Information

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

$3.00 additional fee required for Registered Agent changes

Pamela Gill — President — 6/13/83 — 793-2130

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Do Not Write in This Space

JUL 9 1984

◄ Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

721378
LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporate Principal Office (P.O. Box Number Alone is NOT Sufficient)

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report: 06/20/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	~~CARRENTER, JEAN MRS~~	~~D~~	~~1545 D RD~~	LOXAHATCHEE, FL 0000
2	~~MARROT, GWEN~~	~~S~~	~~455 FOLSOM RD~~	LOXAHATCHEE, FL 0000
3	ROBINSON, RUTH	T	TANGERINE DR 233	LOXAHATCHEE, FL 0000
4	POORE, TOM	D	13154 24TH CT	LOXAHATCHEE, FL 0000
5	YEARTY, VIRGINIA	~~V~~ P	2988 F RD	LOXAHATCHEE, FL 0000
6	~~GTEL, PAYELA MRS~~	P	~~1378 155TH LN~~ N	LOXAHATCHEE, FL 0000
	Hazzard, William C	Pres.	2277 "E" Road	Loxahatchee, Fl. 33470
	Turpin, Jon	V. Pres.	397 Folsom Rd	Loxahatchee, Fl. 33470
	Smith, Mary	Sec.	15160 Scott Pl.	Loxahatchee, Fl.

Registered Agent Information

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.334 and 607.337, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on

SIGNATURE _____ DATE
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature	Date
Typed Name of Signing Officer: William C. Hazzard	Title: President
	Telephone Number

11. Should you desire a certificate of status check the box below and include an additional $5.00 with your report.

CERTIFICATE OF STATUS DESIRED
$5 Additional fee required for certificates

CORP 5001 (R4)

DUE DATE ON OR AFTER JANUARY 1 BECOMES DELINQUENT AFTER MAY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1985

APPROVED

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

721376 A
LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.
TANGERINE DR
P O BOX 91
LOXAHATCHEE FLA 33470

3. Date of Incorporation or Qualification in Florida For Old Domestic or Foreign Corporations Only: 07/20/1971

4. Federal Employer Identification Number (FEI), If Any:

5. Date of Last Annual Report Filed: 07/09/1984

6. Names and Street Addresses of Each Officer and Director as of December 31, 1984

	Name of Officers and Directors	Title	Street Address of Each Officer and Director (DO NOT Use Post Office Box Numbers)	City and State	
1	HAMMOND, WILLIAM C	P	2277 E RD	LOXAHATCHEE, FL	0000
2	HOPE, ELEANOR	V	14965 Okeechobee Road	LOXAHATCHEE, FL	0000
3	ROBINSON, RUTH	T	TANGERINE DR 233	LOXAHATCHEE, FL	0000
4	PAGAN, CHARLES L., SR.	D	15166 Williams Dr.	LOXAHATCHEE, FL	0000
5	YEARTY, VIRGINIA	S.D.	2988 F RD	LOXAHATCHEE, FL	0000
6	SMITH, MARY	S	15260 SCOTT PL	LOXAHATCHEE, FL	0000

Registered Agent Information

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Section(s) 607.034 and/or 617.0501, Florida Statutes, the above named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

The change was authorized by resolution duly adopted by its board of directors or

I hereby accept the appointment of the above stated agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See paragraph restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Trustee or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand the Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signature must be Listed in Item 6).

Signature: Ruth C. Robinson — Date: 4-12-85

Typed Name of Signing Officer: RUTH C. Robinson — Title: Treasurer — Telephone Number: 305-793-2503

11. Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

721579 B

LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

07/20/1971 04/29/1985

HAMMOND, WILLIAM C	P	2277 E RD	LOXAHATCHEE, FL	00000
~~HOPE, ELEANOR~~	~~P~~	~~14965 OKEECHOBEE RD~~	LOXAHATCHEE, FL	00000
ROBINSON, RUTH	T	TANGERINE DR 233	LOXAHATCHEE, FL	00000
FRONT, CHARLES L., SR	D	15166 WILLIAMS DR	LOXAHATCHEE, FL	00000
YEARTY, VIRGINIA	D	2988 E RD	LOXAHATCHEE, FL	00000
SMITH, MARY	S	15160 SCOTT PL	LOXAHATCHEE, FL	00000

REGISTERED AGENT INFORMATION

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

FL.

$3.00 additional fee required for Registered Agent change

6-6-86

CERTIFICATE OF STATUS DESIRED ☐

$5.00 Additional Fee is required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

APPROVED

CORPORATION ANNUAL REPORT 1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

1987 JUN -1 AM 10:35

Read Name and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

721378 8
LOXAHATCHEE LANDOWNERS ASSOCIATION, INC.
TANGERINE DR.
P O BOX 96
LOXAHATCHEE FLA 33470

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone Is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report: 06/11/1986

9. Names and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
HAMOND, WILLIAM C	P D	2277 E RD	LOXAHATCHEE, FL 00000
CASTIGLIONE, DEBRA	V.P.	2065 "C" ROAD	LOXAHATCHEE, FL 00000
ROBINSON, RUTH	T	TANGERINE DR 233	LOXAHATCHEE, FL 00000
PAGAN, CHARLES L., SR	D	15166 WILLIAMS DR	LOXAHATCHEE, FL 00000
YEARTY, VIRGINIA	D V.P.	2988 F RD	LOXAHATCHEE, FL 00000
SMITH, MARY	S	15160 SCOTT PL	LOXAHATCHEE, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9. Pursuant to the provisions of Section 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$1.00 additional fee required for Registered Agent change

10. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6).

Signature: Mary E. Smith, Secretary

Date: 5/18/87

Typed Name of Signing Officer: MARY E. SMITH

Title: Secretary

Telephone Number: 793-7611

11. Should you desire a certificate of status check the box: CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E031 (8/86)

721378

LOCHLOOSA LANDOWNERS ASSOCIATION

Live It and Love It Alone

P. O. Box 96 Lochloosa Florida 32620

Name Change

The attached is a request for a name change only.

We do not wish to amend our articles.

FILED

97 DEC 22 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07/23/97 - 30692 - 650
DOMESTIC AMENDMENTS
AMENDMENT .. 15.00
TOTAL 15.00

ACH 7/23/97
ACH 18
ACH
ACH
ACH
ACH

75
75

ARTICLES OF AMENDMENT

to

ARTICLES OF INCORPORATION

FILED
1987 JUL 22 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provision of Chapter 617, Florida Statutes, the undersigned corporation adopts the following articles of amendment to its articles of incorporation.

FIRST: The name of the corporation is:

Loxahatchee Landowners Association

SECOND: The following amendment(s) to the articles of incorporation was (were) adopted by the corporation:

"To change: Loxahatchee Groves Landowners Association

THIRD: The amendment(s) was (were) adopted by the Board of Directors on the twenty-first day of November, 1986.

FOURTH: The above amendment(s) was (were) approved by a majority of the members of the corporation on the sixth day of January, 1987.

Dated May 12, 1987

Loxahatchee Landowners Association
Corporation Name

By Debi Castiglione
President or Vice President

By Mary E. Smith
Secretary or Assistant Secretary

CR2E009(9-85)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Before me, the undersigned authority, personally appeared DALE CASTELLONE & MARY E. SMITH, to me well known to be the person(s) who executed the foregoing articles of amendment to articles of incorporation and acknowledged before me, according to law, that They made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 18th day of June, 1987.

Notary Public

My commission expires:

Notary Public, State of Florida at Large
My Commission Expires September 15, 1990
Bonded thru Huckleberry, Sibley &
Harvey Insurance and Bonds, Inc.

CR2E009 (9-85)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

721378
LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

PO Box No 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

4. Federal Employer Identification Number (FEI): 59-23?0905

5. Date of Last Report: 06/01/1987

6. Names and Street Addresses of Every Officer and Director as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~HAMMOND, WILLIAM C~~	~~P~~	~~2977 B RD~~	~~LOXAHATCHEE, FL 00000~~
Yearty, Virginia	P	2988 F Rd.	Loxahatchee, FL 33470
~~CASTIGLIONE, DEBRA~~	~~F~~	~~2065 "C" ROAD~~	~~LOXAHATCHEE, FL 00000~~
Hope, Eleanor	V/P	14965 Okeechobee Rd.	Loxahatchee, FL 33470
~~ROBINSON, RUTH~~	~~T~~	~~TANGERINE DR 233~~	~~LOXAHATCHEE, FL 00000~~
Keehr, Marilyn	S	15530 42nd St.No.	Loxahatchee, FL 33470
~~FAGAN, CHARLES L., SR~~	~~D~~	~~15156 WILLIAMS DR~~	~~LOXAHATCHEE, FL 00000~~
Longhurst, Diana	T	14781 Gruber Ln.	Loxahatchee, FL 33470
~~YEARTY, VIRGINIA~~	~~V/P~~	~~2988 F RD~~	~~LOXAHATCHEE, FL 00000~~
Maraj, Sven	D	455 Folsom Rd.	Loxahatchee, FL 33470
~~SMITH, MARY~~	~~S~~	~~15160 SCOTT PL~~	~~LOXAHATCHEE, FL 00000~~
Long, Douglas	D	14844 N. 13th Ln.	Loxahatchee, FL 33470

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

Name 41

Street Address 1 (Do NOT Use P.O. Box Number) 42

Street Address 2 (Do NOT Use P.O. Box Number) 43

City and State 44: FL.

Zip Code 45

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors.

I hereby accept the appointment as registered agent ...

SIGNATURE

Registered Agent Accepting Appointment

DATE

10. ...

I Certify That I Am An Officer or Director of the Corporation or the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. ...

Signature: *Diana Longhurst*

Typed Name of Signing Officer or Director: Diana Longhurst

Title: Treasurer

Date: 4/19/88

Telephone Number: (407)793-3374

11. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee is Required for a Certificate of Status

CR2E034 (1/88)

BY-LAWS OF THE LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION

Amended April, 1978
Amended 1984 & 1985
Amended October, 1987

ARTICLE 1 - STATEMENT OF PURPOSE

A. This is to be a non-profit, chartered organization called the Loxahatchee Groves Landowners Association, Inc. It is to be made up of Property Owner members dedicated to the well being of the area known as Loxahatchee, within the boundries of the Loxahatchee Groves Water Control District, Palm Beach County, Florida.

B. The Association is to hold open meetings in which the opinion of all persons concerned about Loxahatchee can be heard. Any and all subjects related to Loxahatchee can be brought up.

C. An attempt shall be made by the Association to preserve and protect the rural atmosphere of Loxahatchee as well as to keep aware of the necessity to plan and prepare for the future.

ARTICLE 2 - MEMBERSHIP

A. Active - Open to all persons whose names appear on a recorded deed, sales contract or option on land located within the boundaries of the Loxahatchee Groves Water Control District, Palm Beach County, Florida.

B. Honorary - Given at the suggestion of the Board of Directors and by a vote of a majority of the members present to any person considered deserving of the gift. Ownership of property is not necessary, but voting rights are not included if member is not a property owner.

C. Membership will be terminated for non-payment of dues prior to the January meeting of a given year.

ARTICLE 3 - DUES AND MONEY

A. The dues will be payable on or before the January meeting of any given year at $3.00 per person.

B. The Treasurer of the Association shall be in charge of the money and shall sign all checks. An end of the year statement shall be presented at the January meeting.

C. No Officer, Director or member may commit the Association to the expenditure of any money without the permission of a majority of the quorum.

ARTICLE 4 - MEETINGS

A. The Association shall meet on the Third Thursday of every month. A temporary change in the day can be made by a majority vote of the quorum.

B. The Board of Directors shall meet sometime prior to the regular meeting.

C. If any member of the Board of Directors misses three (3) unexcused general meetings in a membership year, his or her office will be considered vacant.

ARTICLE 5 - OFFICERS, DIRECTORS AND ELECTIONS

A. PRESIDENT - Presides at all meetings, serves as ex-officio member of each committee with the privilege of voting only to make or break a tie, calls special meetings with the approval of a majority of the Board of Directors, and acts for the Association in matters of Public Relations, with the approval of a majority of the Board of Directors.

B. VICE-PRESIDENT - Assumes all duties of the President when that officer is unavailable, assists the President in the carrying out of the duties of that office. If the office of President is vacated, the Vice President shall assume the Presidency until the next annual election.

C. SECRETARY - Records all meetings and presents minutes to the members for approval, has charge of all Association correspondence. The President shall be given a copy of each correspondence letter sent by the Secretary.

D. TREASURER - Receives all money and keeps records of same, prepares and signs checks for Association expenses. (see Article 3, Section B)

E. SARGENT-AT-ARMS - Preserves decorum at meetings, has charge of all properties of the Association and keeps inventory of same, has

charge of voting procedures and sees that only qualified members participate in voting, has charge of attendance records. Sign-in sheets shall be circulated at each meeting.

F. DIRECTORS-AT-LARGE - (2) Must attend Board Meetings.

G. BOARD OF DIRECTORS - Shall consist of all the above Officers. It carries out the directives of the membership, conducts emergency business when not of major importance, acts as a Purchasing agent with the approval of the quorum and signs official documents upon quorum approval. If the immediate Past President is not elected to a regular board seat for the following year, he or she shall be a Board member ex-officio without a vote during that year's Board meetings.

H. ELECTIONS - Officers and Directors

1. Nominations for offices shall be made from the floor. All Officers shall be elected for a One (1) year term at the January meeting. Re-election to any office is permitted.

2. No member may be nominated for an office unless he or she has attended no less than Six (6) of the preceding Twelve (12) meetings, or shall have been a paid member of the Association for no less than Three (3) of the preceding Five (5) membership years. Exceptions to this rule may be made if no suitable member can be found to fill a given office.

3. Should any office other then the Presidency become vacant, a special election shall be called.

ARTICLE 6 - COMMITTEES

A. A committee shall be formed of volunteers, if possible, to look into or do anything which cannot be taken care of at the respective meeting. The chairperson of the committee will report on the progress made at the next meeting. Any committee will remain in existence as long as necessary. No committee can call a general meeting without the permission of the board of Directors.

B. The President shall be able to appoint any committee deemed necessary.

C. If a committee fails to do its job, the President may name a new chairperson. If a committee adopts additional projects without authorization by the Board or by a meeting quorum, or makes public statements or appearances that are contrary to the Association's policies and opinions, the committee may be disbanded. The President may then name a new chairperson who will form a new committee.

ARTICLE 7 - MISCELLANEOUS SECTIONS

A. VOTING - Whenever a vote is taken, it may be by secret ballot, a voice vote or a show of hands. The method of voting will be decided by a majority vote of the members present.

B. AMENDMENTS TO BY-LAWS - Any changes to the Association By-Laws shall be presented and discussed at one (1) meeting, then tabled until the next meeting when they must be accepted by a 2/3 majority of the members present.

C. No voting in the Association can be done by proxy.

D. A quorum shall consist of the members present at the meeting (minimum of 10 members).

E. The rules contained in the current edition of "Roberts Rules of Order, Newly Revised", shall govern the Association in all cases to which they are applicable and in which they are not inconsistent with these By-Laws and any special rules the Association may adopt.

F. The Association books shall be audited at the end of the membership year by a committee of three (3) members approved by the quorum at the December meeting.

G. When a member presents a letter that he or she has written and proposes that the letter be sent in the name of the Association, the letter shall be read at a general meeting. The quorum may vote to send the letter as written; or to send the letter with specific changes; or to reject the letter. If the letter is approved for sending as read or as amended, changes made while preparing the letter for sending shall be restricted to corrections of spelling, punctuation and grammar. The letter shall be re-written on Association stationery and be signed by the Association's Secretary or President.

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

APPROVED

FILED

CORPORATION ANNUAL REPORT 1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

ZIP + 4

721378 8
LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470-0096

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21
P.O. Box No. 22
City and State 23
Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

4 Federal Employer Identification Number (FEI): 59-2350906

5 Date of Last Report: 04/29/1988

6 Names and Street Addresses of Each Officer and Director as of December 31, 1988

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~D~~	~~YEARTY, VIRGINIA~~	~~2900 F ROAD~~	~~LOXAHATCHEE, FL 00000~~
P/D	Keehr, Marilyn	15530 42nd Place No.	Loxahatchee, FL 33470
~~V/P~~	~~HOPE, ELENOR~~	~~14965 OKEECHOBEE ROAD~~	~~LOXAHATCHEE, FL 00000~~
VP	Yearty, Virginia	2988 F Road	Loxahatchee, FL 33470
~~S~~	~~KEEHR, MARILYN~~	~~15530 42ND STREET NORTH~~	~~LOXAHATCHEE, FL 00000~~
S	Hope, Eleanor	14965 Okeechobee Road	Loxahatchee, FL 33470
T	LONGHURST, DIANA	14781 GRUBER LANE	LOXAHATCHEE, FL 00000
~~D~~	~~MARAJ, GWEN~~	~~455 FOLSOM ROAD~~	~~LOXAHATCHEE, FL 00000~~
D	Yearty, Dan	2988 F. Road	Loxahatchee, FL 33470
~~D~~	~~LONG, DOUGLAS~~	~~14844 N. 13TH LANE~~	~~LOXAHATCHEE, FL 00000~~
D	Moretz, Hazel	15242 Scott Place	Loxahatchee, FL 33470

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8 Name and Address of New Registered Agent
Name 41
Street Address 1 (Do NOT Use P.O. Box Number) 42
Street Address 2 (Do NOT Use P.O. Box Number) 43
City and State 44: FL
Zip Code 35

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on ____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ____ DATE ____
(Registered Agent Accepting Appointment)

10 If a foreign corporation, date first transacted business in Florida ____

11 See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.
(Officer or Director signing must be listed in Block 6.)

Signature: Diana S. Longhurst
Date: 4/14/89
Typed Name of Signing Officer or Director: DIANA LONGHURST
Title: TREASURER
Telephone Number:

12 Should you desire a certificate of status check this box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee Is Required for a Certificate of Status

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION ANNUAL REPORT 1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

1990 MAR 12 AM 11:49

[illegible stamp text]

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

721378 8

ZIP + 4 PRESORT
LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470-0096

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

PO Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

4. FEI Number: 59-2350906

FEI Number Applied For / FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
P/D	KEEHR, MARILYN	15530 42ND PLACE NO.	LOXAHATCHEE, FL	00000
~~V/P~~	~~YEARTY, VIRGINIA~~	~~2988 F ROAD~~	~~LOXAHATCHEE, FL~~	~~00000~~
V/P	Adamcik, Allan	15405 Fortner Dr.	Loxahatchee, FL	33470
S	HOPE, ELEANOR	14965 OKEECHOBEE ROAD	LOXAHATCHEE, FL	00000
T	LONGHURST, DIANA	14781 GRUBER LANE	LOXAHATCHEE, FL	00000
D	Duckworth, Joanne	1032 Hyde Park	Loxahatchee, FL	33470
~~D~~	~~YEARTY, DAN~~	~~2988 F ROAD~~	~~LOXAHATCHEE, FL~~	~~00000~~
D	Yearty, Virginia	2988 F Road	Loxahatchee, FL	33470
~~D~~	~~MORETZ, HAZEL~~	~~15242 SCOTT PLACE~~	~~LOXAHATCHEE, FL~~	~~00000~~
D	Knisley, Ray	2762 F Rd.	Loxahatchee, FL	33470

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Numbers) 82

Street Address 2 (Do NOT Use P.O. Box Numbers) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on ______
I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ______ (Registered Agent Accepting Appointment) DATE ______

[illegible]

10. I 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature: *Diana Longhurst*

Date: 3/1/90

Diana Longhurst — Typed Name of Signing Officer or Director

Treasurer — Title

Telephone Number: 407/793-3274

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

X872133

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

DO NOT WRITE IN THIS SPACE

FILING FEE OF $61.25 REQUIRED

1 Name and Mailing Address of Corporation DOCUMENT # 721378 (8)

ZIP + 4 PRESORT

LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION
TANGERINE DR
P O BOX 96
LOXAHATCHEE FLA 33470-0096

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

4 FEI Number: 59-2350906

FEI Number Applied For

FEI Number Not Applicable

5 $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	
P/D	KOEHR, MARILYN	15530 42ND PLACE NO.	LOXAHATCHEE, FL	00000
V/P	ADAMCIK, ALLAN	15405 FORTNER DR.	LOXAHATCHEE, FL	00000
S	HOPE, ELEANOR	14965 OKEECHOBEE ROAD	LOXAHATCHEE, FL	00000
~~D~~	~~DUCKWORTH, JEANNE~~	~~1032 HYDE PARK~~	~~LOXAHATCHEE, FL~~	~~00000~~
T/D	Longhurst, Diana	14781 Gruber Ln.	Loxahatchee, FL	
D	YEARTY, VIRGINIA	2988 F ROAD	LOXAHATCHEE, FL	00000
~~D~~	~~KNISLEY, RAY~~	~~2762 F ROAD~~	~~LOXAHATCHEE, FL~~	~~00000~~
D	Lurtz, Gerhard	979 D Road	Loxahatchee, FL	

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8 Name and Address of New Registered Agent

81 Name

82 Street Address (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL 85 Zip Code

9 Pursuant to the provisions of Section(s) 607.0502 and/or 608.4101, 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(s) 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Acceptance Appointment)

10 I certify that the information indicated on this form and all attachments is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 6 or 8 on an attached sheet with an asterisk.

SIGNATURE Diana Longhurst DATE 5/10/91

Type or Print Name of Signing Officer or Director: Diana Longhurst

Title: Treas.

Telephone Number Daytime: (407) 793-3274

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT ... Jim Smith, Secretary ... DIVISION OF CORPORATIONS

FILED SEC. OF STATE CORPORATIONS DIV. TALLAHASSEE, FLA.

FILING FEE $61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation: DOCUMENT #721378 (8)

LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION
TANGERINE DR
P O BOX 96
LOXAHATCHEE FL 33470-0096

DO NOT WRITE IN THIS SPACE

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/20/1971

3a. Date of Last Report: 05/21/1991

4. FEI Number: 59-2350906

FEI Number Applied For / FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status. CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
P/D	KEEHR, MARILYN	15530 42ND PLACE NO.	LOXAHATCHEE, FL	00000
~~V/P~~	~~ADAMCIK, ALLAN~~	~~15405 FORTNER DR.~~	~~LOXAHATCHEE, FL~~	~~00000~~
V/P	Yearty, Virginia	2988 F Road	Loxahatchee, FL	33470
S	HOPE, ELEANOR	14965 OKEECHOBEE ROAD	LOXAHATCHEE, FL	00000
T/D	LONGHURST, DIANA	14781 GRULER LANE	LOXAHATCHEE, FL	00000
~~D~~	~~YEARTY, VIRGINIA~~	~~2988 F ROAD~~	~~LOXAHATCHEE, FL~~	~~00000~~
D	Yearty, Dan	2988 F Road	Loxahatchee, FL	33470
~~D~~	~~LURTZ, GERHARD~~	~~979 D RD~~	~~LOXAHATCHEE, FL~~	~~00000~~
D	Rocheleau, Andre	15831 40th St., North	Loxahatchee, FL	33470

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 33470

8. Name and Address of New Registered Agent

FL.

SIGNATURE Diana Longhurst DATE 7/3/92

Diana Longhurst | Treasurer | (407) 793-0884

File Now. Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

DOCUMENT # 721378 (8)

LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION
~~TANGERINE DR~~
P O BOX 96
LOXAHATCHEE FL 33470-0096

3 07/20/1971 | 3a. 07/14/1992

4 592350906

FILING FEE $700.00 | ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5 $50.75

6 $5.00

7 $138.75

9. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE FL 33470

10. Name and Address of New Registered Agent

FL

~~P/D~~
~~KEENR, MARILYN~~
~~15530 42ND PLACE NO.~~
~~LOXAHATCHEE, FL 00000~~

V/P
YEARTY, VIRGINIA
2988 F ROAD
LOXAHATCHEE, FL 00000

S
HOPE, ELEANOR
14965 OKEECHOBEE ROAD
LOXAHATCHEE, FL 00000

~~T/D~~
~~LONGHURST, DIANA~~
~~14781 GRULER LANE~~
~~LOXAHATCHEE, FL 00000~~

~~D~~
~~YEARTY, DAN~~
~~2988 F ROAD~~
~~LOXAHATCHEE, FL 00000~~

~~D~~
~~POCHELEAU, ANDRE~~
~~15851 40TH ST N~~
~~LOXAHATCHEE, FL 00000~~

P/D
Dave Browning
3056 D Road
Loxahatchee, FL 33470

T/D
Sharyn Browning
3056 D Road
Loxahatchee, FL 33470

D
Diana Longhurst
14781 Gruber Ln.
Loxahatchee, FL 33470

D
Dave Otto
1527 C Road
Loxahatchee, FL 33470

SIGNATURE Diana Longhurst 4/30/93

DIANA LONGHURST DIRECTOR

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

94 APR 28 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name: LOXAHATCHEE GROVES LANDOWNERS ASSOCIATION

DOCUMENT # 721378 (8)

Mailing Address	Principal Place of Business
TANGERINE DR	TANGERINE DR
P O BOX 96	P O BOX 96
LOXAHATCHEE FLA 33470	LOXAHATCHEE FLA 33470

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/20/1971
3a. Date of Last Report: 05/01/1993
4. FEI Number: 59-2350906 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired: $8.75 [illegible] ☐
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit Exempt from $[illegible] Supplemental Fee ☐
8. The corporation has liability for intangible tax under S. 199.[illegible], Florida Statutes. ☐ Yes ☐ No

2. Mailing Address	2a. Principal Place of Business
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

HOPE, ELEANOR MRS.
14965 OKEECHOBEE ROAD
LOXAHATCHEE FL 33470

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 607.0502 and 607.1508 or 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 607.0505 or 617.0503, Florida Statutes.

SIGNATURE ______________________ DATE ________

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE	P/D	
12 NAME	BROWNING DAVE	~~Browning~~ Same
13 STREET ADDRESS	3056D RD	
14 CITY-ST-ZIP	LOXAHATCHEE FL	
21 TITLE	V/P	VP
22 NAME	~~YEARTY, VIRGINIA~~	Bill Louda
23 STREET ADDRESS	~~2988 F ROAD~~	1300 E Rd
24 CITY-ST-ZIP	~~LOXAHATCHEE, FL 00000~~	Loxahatchee, FL 33470
31 TITLE	S	
32 NAME	HOPE, ELEANOR	Same
33 STREET ADDRESS	14965 OKEECHOBEE ROAD	
34 CITY-ST-ZIP	LOXAHATCHEE, FL 00000	
41 TITLE	T/D	T
42 NAME	~~BROWNING SHARYN~~	Davidson, Eileen
43 STREET ADDRESS	~~3056 D RD~~	15094 William Dr
44 CITY-ST-ZIP	~~LOXAHATCHEE FL~~	Loxahatchee, Fl 33470
51 TITLE	D	D
52 NAME	~~LONGHURST DIANA~~	Sharyn Browning
53 STREET ADDRESS	~~14781 GRUBER LN~~	3056 D Rd.
54 CITY-ST-ZIP	~~LOXAHATCHEE FL~~	Loxahatchee, FL 33470
61 TITLE	D	D
62 NAME	~~OTTO DAVE~~	John Johnson
63 STREET ADDRESS	~~1527 C RD~~	1350 E Rd
64 CITY-ST-ZIP	~~LOXAHATCHEE FL~~	Loxahatchee, FL 33470

14. [illegible]

SIGNATURE: Sharyn Browning (Sharyn Browning) 4/25/94 (407) 793-2193
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR