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Feb 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 # 724172 (2)

1. Corporation Name
VALENCIA PARK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business: 2061 SAN SEBASTIAN WAY N CLEARWATER FL 34623
Mailing Address: 2061 SAN SEBASTIAN WAY N CLEARWATER FL 34623-4138

3. Date Incorporated or Qualified: 08/22/1972
3a. Date of Last Report: 03/04/1996
4. FEI Number: 59-1552085
5. Certificate of Status Desired: [X] \$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 [X] No

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

9. Name and Address of Current Registered Agent
WALSH, ARTHUR F.
2066 MADRID CT. NO.
CLEARWATER FL 34623

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

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Rows include DP WALSH, ARTHUR F; VD BOYLE, GEORGE; D BRODEUR, RICHARD; ST SIMON, SHEILA.

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Rows 1.1-6.4 for ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

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: [Signature] 2-19-97 442-3556
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0067532

CR2E037 (9/96)