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

DOCUMENT # 733153

(1)

SADDLEBROOK GOLF AND COUNTRY CLUB CONDOMINIUMS A SSOCIATION, INC.

FILED Mar 04 1996 8:00am Secretary of State



Principal Place	of Business	M	Mailing Address						The state of the s						
SADDLEBROO			5420 LADY BUG LANE												
WESTLEY CHAPEL FL 83543				UNIT 4											
US				WESLEY CHAPEL FL 33543 US						3. Date Incorporated or Qualified 3a. Date of Last Report 06/24/1975 04/26/1995				Report	
										06/24/1975		-	4/26/1	1995	
2. Principal Pla	ace of Busin	ess .	28	2a. Malling Address						4. FEI Number				Applied For	
21				26						59-1499832 Not Applicable					
Sulte, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status	Desired			5 Additional Required	
City & State				City & State						6. Election Campaign F	Inancing		\$5.0	0 May Be	
23			28	28						Trust Fund Contribut	ion			ed to Fees	
Zip	Zip Country			Zip Count					8. This corporation has liability for intangible tax under s. 199.032,						
24		25	29			30	30			Florida Statutes					
	9. Name	and Address of Curre	nt Regi	stered Ag	jent		ļ.,			10. Name and Address	of New Re	platered A	gent		
		_					81	Name						ĺ	
MAGNUSON, NANCY K. 5420 LADY BUG LANE						82 Street Ad				ddress (P.O. Box Number is Not Acceptable)					
UNIT 4							83								
	CHAPEL I	FL 33543								··· ··· ··· ··· ··· ··················					
							84	City				FL	85 Z	ip Code	
11. Pursuant I	to the provisi	ons of Sections 617.0502	2 and 61	17.1508. F	lorida Statuti	as, the abo	ove-r	amed co	ornore	tion submits this statement	for the num		oglog its	registered office	
or register	ed agent, or	both, in the State of Flori	ida. Suc	h change	was authoriz	ed by the	corp	oration's	board	ation submits this statement d of directors. I hereby acce	pt the appoin	ntment as a	egistere	dagent. I am	
	an, and acce	pitine obligations of, Sect	tion 617	.0503, FIC	жоа Statutes										
SIGNATURE Signature, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agent agnature regulated when reinstating) DATE]			
12. OFFICERS AND DIRECTORS 13										ADDITIONS/CHANG	ES TO OFFIC		DIRECTO	ORS IN 12	
TITLE	D				DELETE	1.1 T	ITLE		D	VICE PRESI			Change	Addition	
NAME	FORRES	ST, EMERY			_	1,2 N	IAME			EMEQUE En	00-		-		
STREET ADDRESS	5439 LA	DY BUG LANE, #2						ADDRESS		5439 LNOY	BUAL	ີ.ນ # ►	2		
CITY+ST-ZIP	WESLEY	CHAPEL FL					HTY-S			WESLEY C	KADEL	. F		i	
TITLE	P			Ī	DELETE	2.1 T		- <u> </u>	D	PESOLDE			Change	Addition	
NAME	RAINEY.	, CRAIG A.		_	_	221	LAME		1 1	RAINEY, CRA		_	_ •	_	
STREET ADDRESS	CANA DARDI PORDONI MAN M			235				ET ADDRESS 5434 SAD			DLEBEOOK WAY#1				
CITY-ST-ZIP	MEGLEV CHARELER							ST-ZIP	(WESLEY CH	ADEL.	FI-			
TITLE	D			- 6	DELETE	3.1 T		91 - KIF	D	TREASURER			Change	Addition	
NAME	SHOWA	lter, Jerry		•	7	3.2 N			14						
STREET ADDRESS		DY BUG LANE						ADDRESS		5420 LADY B	INA DU	50 V	N	ocu K,	
CITY-ST-ZIP		CHAPEL FL						ST-ZIP	Ιċ	Nesien Chi	196U.	200	4		
TITLE	D	<u> </u>		r	DELETE	411		21- TH	┼`	D-SCOU CAL	1440		Change	Addition	
NAME	TUCCILI	LO. MARY LOU		•			NAME		1			-			
STREET ADDRESS		ADDLEBROOK WAY, (INIT 4					ADDRESS	1						
		CHAPEL, FL 00000	JIIII 7												
CITY-\$T-ZIP TITLE	VILOUL	0114 66, 16 00000			DELETE	4.4 C		T-ZIP	-				Change	Addition	
NAME	LUCAS,	IVAN		L		1	IAME		P	WCAS, WA	₹V	_	•	LI ALCOIDON	
		DY BUG LN #1								5439 LADY	BUG 1	N 4	-1		
STREET ADDRESS		EY CHAPEL FL						ADDRESS			HAPE				
CITY-ST-ZIP	S	. I OIDVELFL			DELETE		TY-S	T-ZIP	↓	SELECTRO			Change	Addition	
TITLE		NO, CHERYL		L	JUELETE	6.1 T			Р	AUGGA ANA	74 3	,, K	⊒ ∪nange	LI Addition	
NAME							IAME		1	BURBANO, CHA	的方形		J.	ļ	
STREET ADDRESS		KORY HILL LANE				6.3 5	TREET	ADDRESS	ዋፊ	Dep by B	- 14 M	vu ~	_ 	ا رجي رر	
CITY-ST-ZIP	DADE C	ALT FL				6.40	HTY-S	T.101	\mathcal{G}	א שלע אלינו	un l	moe	UT	4,82	

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)(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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.