FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

734976

(4)

LAKE HOWARD TERRACE CONDOMINIUM ASSOCIATION, INC

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Principal Place of Business Mailing Address							A MAGNAL HANDER BARNI DIRING INSAN NO DEC	DIR OIDH DION			
208 E LAKE HOWARD DRIVE 208 E LAKE HOWARD DI WINTER HAVEN FL 33881 WINTER HAVEN FL 3388				IVE							
							Date Incorporated or Qualified 02/18/1976	od 3a. Date of Last Report 03/29/1995			
21	lace of Business	2a. Mailing Address 26				4.	Number				
Suite, Apt.		Suite, Apt. #, etc.			5.	Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Stat	······································	City & State				Election Campaign Financing Trust Fund Contribution			May Be d to Fees		
Zip 24	Country Zip 25 29 9. Name and Address of Current Registered Agent			Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
	9. Name and Address of Current	Registered Agent		81	Name	10.	Name and Address of New R	egistered A	gent		
EITNIER, DALE											
208 E LAKE HOWARD DR #203				82	Street Addr	ress (P.C). Box Number is Not Acceptable	e)			
WINTER	HAVEN FL 33881			83					• • • • • • • • • • • • • • • • • • • •		
				84	City	····		FL	85 Zig	p Code	
or register	to the provisions of Sections 617,0502 red agent, or both, in the State of Florid ith, and accept the obligations of, Section	a. Such change was authoriz	ed by the c	ve-na corpo	amed corpor oration's boar	ation surd of dire	bmits this statement for the purp ectors. I hereby accept the appo	coop of oboo	ging its r gistered	egistered office Lagent, Lam	
SIGNATURE	Signature, typed or printed name of registered agent a	nd the Fancinahia	TE: Desistand	Acces		4			··		
12.			13.	Agent	s-gnature required		Staing) ADDITIONS/CHANGES TO OFFI	DATE OF BS AND D	IRECTO	DES IN 12	
TITLE	P	DELETE	11 10	LE	T.		DOMONO, OF WINDEST TO OFFI		Change	Addition	
NAME	EITNIER, DALE		1.2 NA	1.2 NAME				U			
STREET ADDRESS	208 E LAKE HOWARD DR, #20)3	1.3 STREET		NDDRESS						
CITY-ST-ZIP	WINTER HAVEN, FL 00000		1.4 CIT		-2IP						
TITLE	VO	DELETE 21™		LE	.E				Change	Addition	
NAME			2 2 NA	2 2 NAME							
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CITY-ST-ZIP	WINTER HAVEN, FL 00000		2 4 CI	TY-\$1	r-ZIP						
TITLE	TD DELETE		3.1 TIT	3.1 TITLE					Change	Addition	
NAME	ROHRBACH, MARY P.		3 2 NAME								
STREET ADDRESS			3 3 ST	3 3 STREET ADDRESS							
CITY-ST-ZIP	WINTER HAVEN FL SD	Dorutte	3 4. CI		- ZIP						
TITLE	I 77	DELETE	4.1 Tit					LJ	(:hange	☐ Addition	
NAME	CARSON, MANELLE 208 E LAKE HOWARD DR.		4. 2 NA								
STREET ADDRESS	WINTER HAVEN FL				T ADDRESS						
CITY-ST-ZIP TITLE	D	DELETE	4.4 CIT		· ZIP				Cib	- A days	
NAME	TIDWELL. GENEVA		5.1 TiT 5.2 NA						Change	☐ Addition	
STREET ADDRESS	208 E LAKE HOWARD DR.				pppec						
CITY-ST-ZIP	WINTER HAVEN FL				DDRESS]	
TITLE	D	XXIVELETE	5.4 CIT 6.1 TIT		- 217		·		Change	Addition	
NAME	SILVERSTEIN, STANLEY		6.2 NA		12.	A BM-N	R, RO ERT	42	CHAHYE	☐ MODITION	
STREET ADDRESS	MO E LAVE HOWADD DD						.LAK : HOWARD DRIV	Æ			
MARITED LIANCAL CI					710	T NTE	R HAVEN, FL, 3388:	i –]	
	ov certify that the information supplied wi	th this filing is voluntarily furn	6.4 CiT						o Chat. d.	ng I firether	

I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, error an attachment with an address. TREASURER Mary Robelach 199.9860
Description Property

SIGNATURE PRESIDENT SIDENT TREAS
SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR