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NONP	ROFIT
CORPO	RATION
ANNUAL	<b>REPORT</b>



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of Stare . -DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

(0)

CUMRERI AND	CIRCLE	COMMUNITY	ASSOCIATION.	INC

Principal Place	TH CIR.	Mailing Address						
GAINESVILLE	FL 32000	Gainesville fl 3260	5		3. Date incorporated or Qualified 03/08/1977	3a. Date o	of Last (	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	03	<del>` ,                                   </del>	Applied For
(		26			59-1883157		$\vdash$	Not Applicab
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75	Additional Required
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
Ζιρ	Country	Zip	Coun	try	Trust Fund Contribution			to Fees
	25	29	30	- ,	This corporation has liability for in Florida Statutes	ntangibie tax ur ∐Yes <b>X</b> ∏No		199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re			
			8	Name		<del></del>		
LOCKHA	ART, MADELYN L.			32 Strent A	address (P.O. Box Number is Not Acceptable	le)		
1677 NV	V 19TH CIRCLE							
GAINES'	VILLE FL 32605		[E	33				
			Ε	34 City			<b>5</b> Zip	Code
				1 ' '	poration submits this statement for the purposed of directors. I hereby accept the appo		- 1 .	
	Signature, typied or printed name of registered ages	cauchte-Lapplicable (No.	Her Birgsbried A	gent signature rec	aured when remistating)	DATE		
2.	OFFICERS AN	ID DIRECTORS	TE Registered A	gent signalure rec	azed when reinstating: AUDITIONS/CHANGES TO OF H	DATE GERS AND DIF	R C T OF	3S IN 12
2. Ti &	OFFICERS AN		13. 1.1 TIFL	E		CERS AND DIF	ECTOF hange	
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SIGNATURE:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR TOF DSIJOFO 3/25/96 352/377-5716