FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

Apr 16 1998 8:00am						
Secretary of State						

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CUMBERLAND CIRCLE COMMUNITY ASSOCIATION, INC.								. 1884 1885 1884 1884 1884 1884 1884 1884 1884 1884 1884 1884 1884 1884 1884 1884				
Principal Place of Business				Mailing Address						1 176/11 10800 (1181 1 8198 18193 (111) 0819 0191 0191		1811 818H B i vki 1821
8	000 N.W. 41ST ST. Te. f Ainesville fl 32606				O. BOX 147050-30 NINESVILLE FL 32614-705	i0				Date Incorporated or Qualified 03/08/1977		
Ü				•					4.	FEI Number	L	Applied For
										59-1883157		Not Applicable
2 21	Principal Place of Busin	1088		2a 26	. Malling Address				5.	Certificate of Status Desired		75 Additional se Required
22	Sulte, Apt. #, etc.			27	Suite, Apt. #, etc.				6.	Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
City & State				City & State			7. Is this nonprofit corporation a homeowners association?					
24	Zip	25	Country	29	Zip	30	untry	,	86	This corporation owes or has paid the curre Personal Property Tax due June 30.	ent yea] Yes	ar Intangible No
9. Name and Address of Current Registered Agent							Ι	10. Name and Address of New Registered Agent				
SMITH, BEVERLY K 2830 N.W. 41ST ST. STE. F						81 82 83	Name Street Addre	ress (P.O. Box Number is Not Acceptable)				
	GAINESVILLE FL 3	260	3				84	City		FL	85	Zip Code

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							
		Registered Agent algebrae required when reinstating) DATE					
12.	OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	VD DELETE	1.1 TITLE Addition					
NAME	HOWARD, BILL	12 NAME					
STREET ADDRESS	1592 N.W. 19TH CIR.	1.3 STREET ADDRESS 1592 NW 19th Circle					
CITY-ST-ZIP	GAINESVILLE, FL 00000	1.4 CHY-ST-ZIP 32 605					
TITLE	\$D DELETE	2.1 TITLE D Addition					
NAME	GALLANT, BARBARA	2.2 NAME					
STREET ADDRESS	1620 N.W. 19TH CIR.	23 STREET ADDRESS 1620 NW 19th Circle					
City-St-ZiP	GAINESVILLE, FL 00000	2.4 CITY-ST-ZIP 33605					
TITLE	DELETE	3.1 TITLE PD LI Change Addition					
NAME	LOCKHART, FRAZER W.	32 NAME Bass, George 33 STREET ADDRESS 1610 NW 19th Circle					
STREET ADDRESS	1642 NW 19 CR.	3.3 STREET ADDRESS 1610 NW 19th Circle					
CITY-ST-ZIP	GAINESVILLE, FL 00000	34 CMY-ST-ZIP GOLINGSUILLO FL 32605					
TITLE	TD DELETE	4.1 TITLE S / L. Change DELAddition					
NAME	CANELAS, MARCELO	1.2 NAME Holland, Jane 13 STREET ADDRESS 1607 NW 19th Circle					
STREET ADDRESS	1622 NW 19TH CIRCLE	43 STREET ADDRESS 1607 NW 19th Circle					
CITY-ST-ZIP	GAINESVILLE FL 32605-4028	44 CITY-ST-ZIP Gainesville FL 32605					
TITLE	PD	5.1 TITLE D Change Addition					
NAME	CAMPEN, DIXIE K	52 NAME Johnson, Don					
STREET ADDRESS	1630 NW 19TH CIRCLE	5.3 STREET ADDRESS 1638 NW 19th Circle 5.4 CITY-ST-ZIP Gaines ville FL 32605					
CITY-ST-ZIP	GAINESVILLE FL						
TITLE	DELETE	6.1 TITLE Change Addition					
NAME	JONES, BRENDA V	6.2 NAME					
STREET ADDRESS	1659 NW 19TH CIRCLE	6.3 STREET ADDRESS					
E	0.4M (0.0) M (0.0) A 0.00 A 0.00						

CITY-ST-ZIP

GANESVILE FL 32805-4028

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 changes or on an attachment with an address.

SIGNATURE:

3/3/18 353-374-8096