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 # 753152 (8)

1. Corporation Name

TIGER CREEK OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2580 TIGER CREEK FOREST LAKE WALES FL 33853	2580 TIGER CREEK FOREST LAKE WALES FL 33853

3. Date Incorporated or Qualified: 06/27/1980

3a. Date of Last Report: 05/01/1995

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:

4. FEI Number: 59-1376889 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$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 ☐ No

9. Name and Address of Current Registered Agent

CRANDALL, MIKE
3920 TIGER CREEK FOREST
LAKE WALES FL 33853

10. Name and Address of New Registered Agent

81 Name: Cindy Chandley

82 Street Address (P.O. Box Number is Not Acceptable): 4640 Tiger Creek Forest

83: Lake Wales, Fl. 33853

84 City: Lake Wales, Fl. — FL — 85 Zip Code: 33853

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: Cindy Chandley (Pres.) Cindy Chandley — 1/27/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CRANDALL, MIKE 3920 TIGER CREEK FOREST LAKE WALES FL 33853	☒ DELETE	1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P Chandley, Cindy 4640 Tiger Creek Forest Lake Wales, Fl.33853	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JOHNSON, DOREEN 4820 TIGER CREEK FOREST LAKE WALES FL 33853	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	V Dickey, Nora 4030 Tiger Creek Forest Lake Wales, Fl. 33853	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ELLIS, MIKE 4245 TIGER CREEK FOREST LAKE WAKES FL 33853	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	V Ellis, Mike 4245 Tiger Creek Forest Lake Wales, Fl. 33853	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CHNADLEY, CINDY 4640 TIGER CREEK FOREST LAKE WALES FL 33853	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T Grossenbacher, Ruth 2760 Tiger Creek Forest Lake Wales, Fl. 33853	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DICKEY, NORA 4030 TIGER CREEK FOREST LAKE WALES FL 33853	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	S Heller, Jennifer 1510 Stevens Loop Babson Park, Fl. 33827	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

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)(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, or on an attachment with an address.

SIGNATURE: Ruth Grossenbacher Treasurer — 2/27/96 — 941-696-2248
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Ruth Grossenbacher Treasurer