## FILE NOW: FILING FEE IS \$61.25

NAME

STREET ADDRESS

SIGNATURE

CITY-ST-ZIP

**FILED NONPROFIT** Apr 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 755365 (4) ENGLISH PARK CONDOMINIUM, INC. Principal Place of Business Mailing Address 164 ULSTER LANE 164 ULSTER LANE 3. Date Incorporated or Qualified MELBOURNE FL 32935 MELBOURNE FL 32835 12/02/1980 4. FEI Number Applied For 59-2202949 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name KRAMER, REBECCA Street Address (P.O. Box Number is Not Acceptable) **184 ULSTER LN** 83 **MELBOURNE FL 32935** 84 City Zip Code 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 Signature, typed or printed hanne of registered agent and title # applicable (NCITE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE KREMER, SHELLY NAME 1.2 NAME 999 NEIE AVE NE STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE PD CORWIN, GEORGE NAME 2.2 NAME STREET ADDRESS 17 E HIBISCUS BLVD 2.3 STREET ADDRESS MELBOURNE FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE Channe 31 TITLE BENDL, CHARLES NAME 3.2 NAME STREET ADDRESS 1534 ENSENADA DRIVE 3.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE WHITE, WILLIAM 4 2 NAME NAME 380 NEPTUNE DR NE STREET ADDRESS 4.3 STREET ADDRESS PALM BAY FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE

AD NAME

6.3 STREET ADDRESS

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)(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 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.