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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF &TATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 755930

(5)

	RD WEST HOMEOWNERS'	ASSOCIATION, INC.			
rincipal Place of	f Business	Maiting Address			
PO BOX 473 PALM HARBOR	R FL 34682	PO BOX 473 PALM HARBOR FL 346	82		ed 3a. Date of Last Report
				3. Date Incorporated or Qualific 01/16/1981	03/20/1995
. Principal Plac	pe of Business	2a. Mailing Address		4. FEI Number 59-2060768	Applied For Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financin Trust Fund Contribution	§ \$5.00 May Be Added to Fees
Zip	Country	Zip	Country		for intangible tax under s. 199.032,
	25 9. Name and Address of Curren	t Pagistared Agent	[30]	10. Name and Address of Ne	
	9. Name and Address of Curren	(Registered Agent	81 Name		
07001141	UED CARVAI		00 65	STOVEN H. MG Address (P.O. Box Number is Not Acce	ntable)
	uer, gary n. W street, suite a		82 Street /	1212 COURT ST	SUITEB
	ATER FL 34615		83		
ULEARW	AIEN PE 34013		84 City		85 Zip Code _
		Λ	1-1	Cleanwater	FL 346/6
11. Pursuant to	o the provisions of Sections 617,0502	and 617.1508, Florida Statu	tes, the above-named co	orporation submits this statement for the	e purpose of changing its registered office appointment as registered agent. I am
	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect			. ^	./ -10/
	n, and accept the obligation 1, 1111	1101 18	10 STEUR	3N H- MEZER, UM	ES 9/13/16
IGNATURE _	Signature, typed or preiting name of registered agest	and but I apply Aims	OTE: Registered Agent signature in	enured wher remistated	UATE :
	Signature, typed or protoconance of registered agric OFFICERS AN	ID DIRECTORS U	OTE Registered Agent signature in 13.	enured wher remistated	OFFICERS AND DIRECTORS IN 32
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