

**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 # 760605 (6)

1. Corporation Name  
**LAKE MAGDALENE CMC ASSOCIATION, INC.**



Principal Place of Business: 1218 TERRA MAR DR TAMPA FL 33613  
Mailing Address: 1218 TERRA MAR DR TAMPA FL 33613

3. Date Incorporated or Qualified: 11/05/1981  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 59-2602517  
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

2. Principal Place of Business  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country  
2a. Mailing Address  
26. Suite, Apt. #, etc.  
27. City & State  
28. Zip  
29. Country  
30. Country

9. Name and Address of Current Registered Agent  
**FOTOPULOS, THOMAS E  
315 E. MADISON  
SUITE 1000  
TAMPA FL 33602**

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City  
85. 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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	HARRIS, JERRY R	1.1 TITLE: PD	MONTAMBAULT, LEON
STREET ADDRESS: 1218 TERRA MAR DR	TAMPA FL 33613	1.2 NAME: MONTAMBAULT, LEON	1.3 STREET ADDRESS: 1206 MAGDALENE GROVE
CITY-ST-ZIP: TAMPA FL 33613		1.4 CITY-ST-ZIP: TAMPA, FL 33613	
TITLE: VD	MCCREARY, JOHN B	2.1 TITLE: VD	MCCREARY, JOHN B
STREET ADDRESS: 906 TERRA MAR DR	TAMPA FL 33613	2.2 NAME: MCCREARY, JOHN B	2.3 STREET ADDRESS: 906 TERRA MAR DR
CITY-ST-ZIP: TAMPA FL 33613		2.4 CITY-ST-ZIP: TAMPA, FL 33613	
TITLE: VD	MONTAMBAULT, LEON	3.1 TITLE: VD	CAMRBELL, Debbie
STREET ADDRESS: 1206 MAGDALENE GROVE	TAMPA FL 33613	3.2 NAME: CAMRBELL, Debbie	3.3 STREET ADDRESS: 1212 MAGDALENE HILL DR.
CITY-ST-ZIP: TAMPA FL 33613		3.4 CITY-ST-ZIP: TAMPA, FL 33613	
TITLE: SD	HOWELL, MERRILL	4.1 TITLE: SD	GIUNTA, Sherry (Giunta)
STREET ADDRESS: 1105 TERRA MAR DR	TAMPA FL 33613	4.2 NAME: GIUNTA, Sherry (Giunta)	4.3 STREET ADDRESS: 901 TERRA MAR DR
CITY-ST-ZIP: TAMPA FL 33613		4.4 CITY-ST-ZIP: TAMPA, FL 33613	
TITLE: TD	MCCREARY, SHIRLEY	5.1 TITLE: TD	MCCREARY, Shirley
STREET ADDRESS: 906 TERRA MAR DR	TAMPA FL 33613	5.2 NAME: MCCREARY, SHIRLEY	5.3 STREET ADDRESS: 906 TERRA MAR DR
CITY-ST-ZIP: TAMPA FL 33613		5.4 CITY-ST-ZIP: TAMPA, FL 33613	
TITLE: D	COLEMAN, JOYCE M	6.1 TITLE: D	COLEMAN, Joyce M.
STREET ADDRESS: 905 TERRA MAR DR	TAMPA FL 33613	6.2 NAME: COLEMAN, JOYCE M.	6.3 STREET ADDRESS: 905 TERRA MAR DR
CITY-ST-ZIP: TAMPA FL 33613		6.4 CITY-ST-ZIP: TAMPA, FL 33613	

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: [Signature] DATE: 4-27-96 813 932 8346

CR2E037 (12/95)