FILE NOW: FILING FEE IS \$61.25

NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State CHISIPMOF CORPORATIONS 763613 **DOCUMENT #** GLENEAGLES GREEN HOME OWNERS ASSOCIATION, INC. Mailing Address Principal Place of Business P.O. BOX 756 P.O. BOX 756 NICEVILLE FL 32588 NICEVILLE FL 32588 Date Incorporated or Qualified 06/08/1982 3a. Date of Last Report 04/19/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-2397795 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State \Box Added to Fees Trust Fund Contribution 26 23 This corporation has liability for intangible tax under s. 199.032. Country Zm Zip Country Yes X No 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) PANNELLI, ROBERT J 82 111 GLENEAGLES DR вз NICEVILLE FL 32578 Zip Code 84 City 1/1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am 0.003, Florida Statutes. 11. Pursuant to the or registered age familiar with, and 24/96 PHINELL PODERT SIGNATURE red when reinstating) (12/95)e of registered agent and title if applicable ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. ☐ Change Addition DELETE 1 1 TUTLE TITLE **CR2E037** MELNICK, NORBERT 1.2 NAME NAME 708 SUNNINGDALE COVE 1.3 STREET ADDRESS STREET ADDRESS NICEVILLE FL 1.4 CITY - ST- ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE **VPVD** TITLE MORRISON, BRADLEY 22 NAME NAME 138 GLENEAGLES DR 2.3 STREET ADDRESS STREET ADDRESS NICEVILLE FL 2 4 CITY - ST - ZIP CITY - ST - ZIP Change ☐ Addition DELETE 31 TITLE TTSD TiTI F PANNELLI, ROBERT 32 NAME NAME 33 STREET ADDRESS 111 GLENEAGLES DR STREET ADDRESS 34 CITY-ST-ZIP NICEVILLE FL CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE MUNDINGER, GEORGIA LINDSAY, STANLEY 4. 2 NAME NAME 145 WENEAGLES DRIVE 4.3 STREET ADDRESS 146 GLENEAGLES DR STREET ADDRESS MICEVILLE, FL 32578 NICEVILLE FL 4 4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition DELETE SIDDE TITLE LIPCSEY, MICHAEL 5.2 NAME LIPESEY NAME 19 SOUTHWIND CT. 19 SOUTHWIND CT 5.3 STREET ADDRESS STREET ADDRESS VICEYILLE, FL NICEVILLE FL 5.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE TITLE CZONSTKA, STANLEY 6.2 NAME NAME 153 GLENEAGLES DR 6.3 STREET ADDRESS STREET ADDRESS NICEVILLE FL 6.4 CITY - ST - ZIP upplied with this filing a voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further this annual report is true and accurate and that my signature shall have the same legal effect as if made under a coporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name 14. I do hereby certify that the info certify that the information inclidated oath; that I am an officer or director appears in Block 12 or Block, 13 f cl

KOBERT J. PANNELL

SIGNATURE:

904-697-3644×1132