FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Sep 25 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

767078

(9)

SURREY WOODS TOWNHOME ASSOCIATION, INC.

SURREY WOODS TOWNHOME ASSOCIATION, INC.													
Principal Place of Business				Mailing Address							ITOM BIEN DIQUE		
% NANCY GRIECO 2830 B STONEWAY FT. PIERCE FL 34982 US				% NANCY GRIECO 2834 B STONEWAY FT. PIERCE FL 34982-6175 US				-	Date Incorporated or Qualified 02/18/1983	3a. D	ate of Last R 05/01/19		
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			plied For	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					59-2476982	~		t Applicable	
22				27					5. Certificate of Status Desired	_ <u>¤</u>	\$8.75 / Fee Re	1	
City & State				City & State					Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip				Zip Country					8. This corporation has liability for	intanoible			
24	25			29 30				Florida Statutes X Yes No				,	
	9. Name	and Address of	Current Regi	stered Agent					10. Name and Address of New R	egistered	Agent		
						81	Name						
GRIECO, NANCY						82	Street A	Address	(P.O. Box Number is Not Accepta	ble)			
2830 B STONEWAY LANE FT. PIERCE FL 34982						В3					 -		
							City			FL	85 Zip (Code	
11. Pursuant	to the provisi	lons of Sections	617 0502 and 6	517,1508, Florida Sta	atutes the at	nove	a-named o	COLDOLA	tion submits this statement for the		e Landing it	s registered	
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			3		*****							Ì	
Signature, typed or printed name of registered agent and title if applicable. (NOTE							nt signature re	required w	rhen (einstating)	DATE			
12.		OFFICI	ERS AND DIRE		13.				ADDITIONS/CHANGES TO OFF	CERS AN			
TITLE	PD	A144 B1 BA		DELETE	1.1 111		-				Change	☐ Addition	
NAME		, CHARLES	44.00		1.2 N/		İ						
STREET ADDRESS		STONEWAY L	ANE				ADDRESS						
CITY-ST-ZIP TITLE	FT. PIE	HUE FL		DELETE	1,4 CI 2,1 TI		T-ZIP				Change	☐ Addition	
NAME	VD VADV	KENNETH		C ptetic								- Nosilion	
STREET ADDRESS		STONEWAY L	ANE				2.2 NAME 2.3 STREET AODRESS						
CITY-ST-ZIP	FT. PIE		AINE		- 1	ITY-ST-ZIP							
TITLE	D	TOL I L		DELETE	3.1 Til		51-211				Change	Addition	
NAME	_	N, GEORGE			3.2 NA	ME							
STREET ADDRESS	2815-A STONEAWAY LANE					3.3 STREET ADDRESS							
CITY-ST-ZIP	FT PIER		3.4. CITY-ST-ZIP										
TITLE	D DELETE					LE			······································		Change	Addition	
NAME	LEWIS,	JIMMEY			4. 2 N	AME						j	
STREET ADDRESS		STONEAWAY	LANE		4.3 ST	AEET	ADDRESS						
CITY-ST-ZIP	FT PIER	ICE FL 34982			4,4 CI	Y • S	T-ZIP						
TITLE	⊅			☐ DELETE	5.1 Til	LE				_	Change	Addition	
NAME	NANX	N GRIE	CO		5.2 NA	WE							
STREET ADDRESS	2830-	BSTO	LN			ADDRESS							
CITY-ST-ZIP	FORT	<u>Plerci</u>	e FL	34982	5.4 CI	_	T-ZIP					1238	
TITLE				☐ DELETE	6.1 Til						∐ Change	☐ Addition	
NAME					6.2 NA								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP	by certify that	t the information	supplied with t	his filing does not a	6.4 CII			lated in	Section 119.07(3)(i). Florida Statut	es. I furthe	or certify that	the	
Informatio	14. I do 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.												