## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

767169

(6)

LEEWARD CONDOMINIUM OWNERS ASSOCIATION, INC.

LEEWARD CONDOMINIUM OWNERS ASSOCIATION, INC.					
Principal Place of Business		Mailing Address		4 100(1) (0 DIO 141) LOCOP IVOLA DINVI	) vald gråft årent asånt årant gråft årent taåt
% Charles Hacker 49 Alden Ave. Atlanta ga 30309-2006		% Charles Hacker 49 Alden Ave. Atlanta ga 30309-2006		Date incorporated or Qualified	3a. Date of Last Report
				02/24/1983	02/22/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<del></del>	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	_ <del></del>
24	25	29 3	0	Florida Statutes	Yes ZNo
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Re	iglstered Agent
rance			81 Name		
FORRESTER, A.J. ROUTE 2, BOX 3460			82 Street Addr	ress (P.O. Box Number is Not Acceptal	ole)
PT. WASHINGTON FL 32459			83	· · · · · · · · · · · · · · · · · · ·	
•			84 City		<b>85</b> Zip Code
	10 10 012 05	00 - 10474500 Ft 14 01 4			_FL_    _
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 name of registered agont and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	Р	☐ DELETE	1.1 TITLE		Change Addition
NAME	MCCAY, JOE		1.2 NAME		
STREET ADDRESS	3605 WESTCHESTER CIR		1.3 STREET ADDRESS		į
CITY-ST-ZIP	BIRMINGHAM AL 32523	T pricts	1.4 CITY-ST-ZIP		100000
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	FORRESTER, ALICE		2.2 NAME		
STREET ADDRESS	ROUTE 2, BOX 3460		2.3 STREET ADDRESS		
CITY-ST-ZIP	PT. WASHINGTON FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
TITLE NAME	S CAROL	C) bitter	3.1 (II) LE 3.2 NAME		Change (1) Addition
STREET ADDRESS	O'NEAL, CAROL 200 WHITNEY WAY		3.3 STREET ADDRESS		1
	FAYETTEVILLE GA		3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	T	DELETE	4,1 TITLE		Change Addition
NAME	HACKER, CHARLES		4. 2 NAME		
STREET ADDRESS	49 ALDEN AVE.		4.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30309		4.4 CITY - ST - ZIP		
TITLE	D	DELETE	5.1 TITLE		Change Addition
NAME	HENDRIX, THOMAS		5.2 NAME		-
STREET ADDRESS	303 CASELTON WAY		5.3 STREET ADDRESS		
CITY-ST-ZIP	MARIETTA GA		5.4 CITY-ST-ZIP		
TITLE	D	DELETE	6.1 TITLE		Change Addition
NAME	SMITH, DAMON		6.2 NAME		,
STREET ADDRESS	2124 JENNETTE ST		6.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32312		6 4 CHY-ST-ZIP		
ee I de basel	no analist de la compania del compania del compania de la compania del la compania de la compania del la compania de la compan	ad with this filing dose not qualify.	for the overention states	Lin Continu 440 07/01(1) Closide Otabula	1 4

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.