## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996
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DOCUMENT #
1. Corporation Name

768313

(9)

## COUNTRY LAKES COMMUNITY ASSOCIATION, INC.

•					)	
Principal Place of Business		Mailing Address	Mailing Address			
•		P O BOX 1662				
WINTER GARDEN FL 34777 WINTER GARDEN FL 34777			777			
					Date Incorporated or Qualified	3a. Date of Last Report
					05/06/1983	06/12/1995
2. Principal Pk	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		59-2699961	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	
23		28			Trust Fund Contribution	\$5.00 May Be Added to Fees
Zıp	Country	Zip	Country	,	8. This corporation has liability for i	
24	25 29 30		30	Florida Statutes 🔀 Yes 🗌 No		
	9. Name and Address of Current	10. Name and Address of New R	egistered Agent			
0101411			81	Name		
GIRVIN, J.STEVEN 800 S.DILLARD ST.			82	Street	Address (P.O. Box Number is Not Acceptab	le)
	CLARU ST. GARDEN FL 32787		83			
MAIRI	CANDEN PE 32707					
			84	City		FL 85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-nam or registered agent, or both, in the State of Florida. Such change was authorized by the corporat familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.</li> </ol>					orporation submits this statement for the pur board of directors. I hereby accept the appe	pose of changing its registered office bintment as registered agent. I am
SIGNATURE	in, and accept the deligatoris of, cook	on on ricodo, i londa etatotea.				
					equired when reinstating:	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	
TITLE	PD ANIMOON CEODOE	DELETE	1 1 TITLE	D	VENABLES, BETH	Change 🔀 Addition
NAME	AAAAA AAAAA WAXAAAAAAAAAAAAAAAAAAAAAAAA		12 NAME		14128 COUNTRY ESTATES	ne.
STREET ADDRESS	WINTER GARDEN FL			T ADDRESS	WINTER GARDEN FL	DK.
CITY-ST-2IP TITLE			14 CITY - : 2 1 TITLE	51-ZiP	WINTER GARDEN FC	Change Addition
NAME	DAVID, PAULINE		2 2 NAME			
STREET ADDRESS	14138 LAKE TILDEN BLVD		2 3 STREE	T ADDRESS		
CITY-ST-ZIP	WINTER GARDEN FL		2 4 CITY-	ST-ZIP		
TITLE	TD	DELETE	3 1 TITLE			Change Addition
NAME	DEASE, JOHN		3.2 NAME			
STREET ADDRESS	1125 CROSS COUNTRY RD		33 STREE	T ADDRESS		
CITY-ST-ZIP	WINTER GARDEN FL	Carre	3.4 CITY-	ST-ZIP		D0
TITLE	VD	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME CAREER ADDOCCO	PADGETT, RICHARD 14265 COUNTRY ESTATE DRI	VE	4. 2 NAME			
STREET ADDRESS	WINTER GARDEN FL	TL.		I ADDRESS		
CITY-ST-ZIP TITLE			4.4 CITY - 5 1 TITLE	31-411	<del> </del>	Change Addition
NAME	OOLEMAN JENNIEED		5.2 NAME			book to the book control of
STHEET ADDRESS	14289 COUNTRY ESTATE DRI	VE		T ADDRESS		
CITY-ST-ZiP	WINTER GARDEN FL		5 4 CITY-			
TITLE	M. P		61 TITLE	·····		Change Addition
NAME	GIL, SUSAN		6 2 NAME			
STREET ADDRESS	14126 LAKE TILDEN BLVD		6 3 STREE	T ADDRESS		
CITY - ST - ZiP	WINTER GARDEN FL		6 4 CITY-			
14. Ldo hereb	v certify that the information supplied v	vith this filing is voluntarily furni	shed and doe	es not qua	alify for the exemption stated in Section 119.	07(3)(k), Florida Statutes, I further

riso nelegy of any that the information supplied with this limit is voluntarily furnished and does not quality for the exemption stated in Section 119.07(5)(k), Florida Statutes. Flurther 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR