FILED Feb 25, 1999 8:00 am

Secretary of State

02-25-1999 90033 001 ****61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 768619

KEIRNAN, NEIL

COLE, SHANNON

JASPER, SIMON

12900 VONN RD #A201

12900 VONN RD #A202

LARGO FL

LARGO FL

LARGO FL

VPD

12900 VONN ROAD #G-201

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

CITY-\$T-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

1. Corporation Name

LABELLE CONDOMINIUM ASSOCIATION, INC.							
Principal Plac	ce of Business	Mailing Address					
12900 VONN RD. LARGO FL 33774 US		C/O PAREKH, COMMONS & CO. 2700 EAST BAY DRIVE. #107 LARGO FL 33771 US					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualifed			
21		26			05/25/1983		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			4. FEI Number	Ap	plied For
22		27	···-		59-2343002		t Applicable
City & Sta	te	City & State			5. Certificate of Status Desired	\$8.75 Fee Re	
Zip	Country	Zip	Country	•	6. Election Campaign Financing	\$5.00	May Be
24	25	29 30	0		Trust Fund Contribution	Added t	to Fees
9. Name and Address of Current Registered Agent 81 Name					10. Name and Address of New Register	ed Agent	
THOMPSON, HOMER				82 Street Address (P.O. Box Number is Not Acceptable)			
12900 VONN RD #A101							
LARGO FL 33774			83				
}			84	City	_	- 85 Zip C	Code
				0,	F		
office or	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the obligations.	of Florida. Such change was auth	norized by	the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its pointment as re	registered gistered
SIGNATURE							
12.	Signature, typed or printed name of registered ager OFFICERS AN	T and title if applicable. (NOTE: RE	13.	it signature i	required when reinstating) ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	PD DELETE		1.1 TITLE		1	☐ Change	Addition
NAME	THOMPSON, HOMER		1.2 NAME				_
STREET ADDRESS 12900 VONN RD #A101			1.3 STREET ADDRESS				
CITY-ST-ZIP	LARGO FL 35'	774	1.4 CITY-S		,		
TITLE	D	⊠ DELETE	2.1 TITLE	-	SEC	☐ Change	Addition
NAME	MILLER, ROGER		2.2 NAME		HELEN HAZLETT		
STREET ADDRESS	,		2.3 STREET	ADDRESS	12900 VONN RD # 31	٠,	ļ
CITY-ST-ZIP	LARGO FL		2. 4 CITY-S	T-ZIP	LARGO FL 3	3774	
TITLE	SD	☐ DELETE	3.1 TITLE		U-PRES	Change	☐ Addition

6.4 CITY-ST-ZIP 14. I 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, with all other like empowered.

3.2 NAME

4.1 TITLE

4. 2 NAME

517ID F

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

☐ DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 C/TY+ST+78P

TREAS

LARGO

LARGO

DIR

21TILOF WEARANA

12960 VONN RD # A 105

RHONDA SIEGERS 12900 VONN RD # A104

3.4. CITY-ST-ZIP

短易。BEQUIRED **SIGNATURE**

Change

<u>∌</u>∌774

Change

Addition

☐ Addition