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FILED

Mar 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768921 (9)

1. Corporation Name

EMERALD LAKES TOWNHOMES HOMEOWNERS ASSOCIATION,
INC.

Principal Place of Business

Mailing Address

5842 SE WINDSONG LANE
STUART FL 349975842 SE WINDSONG LANE
STUART FL 34997-82243. Date Incorporated or Qualified
06/14/19833a. Date of Last Report
02/14/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-2303888Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORNETT, JANE
401 E. OSCEOLA ST.
STUART FL 34994

#1 Name

#2 Street Address (P.O. Box Number is Not Acceptable)

#3

#4 City

FL

#5

Zip Code

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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME BLEAM, FRANKLIN
STREET ADDRESS 6526 SE WINDSONG LANE
CITY-ST-ZIP STUART FL1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME KAVANAGH, BERNARD
1.3 STREET ADDRESS 5933 SE WINDSONG LANE
1.4 CITY-ST-ZIP STUART, FL 34997TITLE D ☒ DELETE
NAME BYRUM, ANN
STREET ADDRESS 5957 SE WINDSONG LANE
CITY-ST-ZIP STUART FL2.1 TITLE S ☒ Change ☐ Addition
2.2 NAME BYRUM, ANN
2.3 STREET ADDRESS 5957 SE Windsong Lane
2.4 CITY-ST-ZIP STUART, FL 34997TITLE T ☐ DELETE
NAME SALVIA, CHARLES
STREET ADDRESS 5843 SE WINDSONG LANE
CITY-ST-ZIP STUART FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME GAYWOOD, JOHN
STREET ADDRESS 6482 SE WINDSONG LANE
CITY-ST-ZIP STUART FL4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME BUTLER, ROBERT
4.3 STREET ADDRESS 5873 SE WINDSONG LANE
4.4 CITY-ST-ZIP STUART, FL 34997TITLE V ☐ DELETE
NAME FOOHS, W.C.
STREET ADDRESS 5724 SE WINDSONG LN.
CITY-ST-ZIP STUART FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE P ☐ DELETE
NAME YETMAN, GEORGE
STREET ADDRESS 5840 SE WINDSONG LN.
CITY-ST-ZIP STUART FL6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0072308

CP2E037 (9/96)