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FILED
May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 768921 (9)

1. Corporation Name
EMERALD LAKES TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 5842 SE WINDSONG LANE STUART FL 34997	Mailing Address 5842 SE WINDSONG LANE STUART FL 34997
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified 06/14/1983	4. FEI Number 59-2303888	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No		

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☒ DELETE	1.1 TITLE	T ☐ Change ☒ Addition
NAME	BLEAM, FRANKLIN	1.2 NAME	KAVANAGH, BERNARD
STREET ADDRESS	6526 SE WINDSONG LANE	1.3 STREET ADDRESS	5933 SE WINDSONG LANE
CITY-ST-ZIP	STUART FL	1.4 CITY-ST-ZIP	STUART, FL 34997
TITLE	S ☐ DELETE	2.1 TITLE	D ☐ Change ☒ Addition
NAME	BYRUM, ANN	2.2 NAME	MANDEHR, NORMAN
STREET ADDRESS	5957 SE WINDSONG LANE	2.3 STREET ADDRESS	6524 SE WINDSONG LANE
CITY-ST-ZIP	STUART FL	2.4 CITY-ST-ZIP	STUART, FL 34997
TITLE	T ☒ DELETE	3.1 TITLE	VP ☒ Change ☐ Addition
NAME	SALVIA, CHARLES	3.2 NAME	BUTLER, ROBERT
STREET ADDRESS	5843 SE WINDSONG LANE	3.3 STREET ADDRESS	5873 SE WINDSONG LANE
CITY-ST-ZIP	STUART FL	3.4 CITY-ST-ZIP	STUART, FL 34997
TITLE	D ☒ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	BUTLER, ROBERT	4.2 NAME	NAU, JAMES
STREET ADDRESS	5873 SE WINDSONG LANE	4.3 STREET ADDRESS	6472 SE WINDSONG LANE
CITY-ST-ZIP	STUART FL	4.4 CITY-ST-ZIP	STUART, FL 34997
TITLE	V ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	FOOHS, W.C.	5.2 NAME	
STREET ADDRESS	5724 SE WINDSONG LN.	5.3 STREET ADDRESS	
CITY-ST-ZIP	STUART FL	5.4 CITY-ST-ZIP	
TITLE	P ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	YETMAN, GEORGE	6.2 NAME	
STREET ADDRESS	5840 SE WINDSONG LN.	6.3 STREET ADDRESS	
CITY-ST-ZIP	STUART FL	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.

SIGNATURE *Ann Byrum* Ann Byrum, Secretary 4/29/98 561-220-3684

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