FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768921

1. Corporation Name

EMERALD LAKES TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5842 SE WINDSONG LANE STUART FL 34997 5842 SE WINDSONG LANE STUART FL 34997

FILED Mar 03, 1999 8:00 am § Secretary of State

03-03-1999 90060 023 ****61.25



		On Marillan Address			3. Date incorporated or Quali	fod			
2. Principal Place of Business		2a. Mailing Address			06/14/1983	ied.			
21 Cuito Ant	#	Suite, Apt. #, etc.			4. FEI Number		Anr	olied For	
— · · · · · · · · · · · · · · · · · · ·					59-2303888		1	Applicable	
City & State		27 City & State			33 E00000		\$8.75 A		
— ··· · · · · · · · · · · · · · · · · ·					5. Certifcate of Status Desire	d 🗆	Fee Red		
23 Zip	Country		Country		6. Election Campaign Finance				
				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
4				10. Name and Address of New Registered Agent					
	s. Name and Address of Current	Vehistelen Wholir	81	Name					
CORNETT, JANE				82 Street Address (P.O. Box Number is Not Acceptable)					
401 E. OSCEOLA ST.									
STUART FL 34994				1					
			84	City		FL	85 Zip C	ode	
				<u>!</u>			, <u> </u>		
11. Pursuant	to the provisions of Sections 617.0502 egistered agent, or both, in the State of	! and 617.1508, Florida Statutes	s, the abov	e-named a	corporation submits this statement for oration's board of directors. I hereby a	the purpose of ccept the appoi	changing its i	registered	
agent. I a	m familiar with, and accept the obligat	ions of, Section 617.0503, Florid	da Statutes	3.					
SIGNATURE					•				
CICHATORE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: F		nt signature re	equired when reinstating)	DATE	- BIDEOTO	20 134 40	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO	OFFICERS AN			
TITLE	T	X DELETE	1,1 TITLE		T		Change	Addition	
NAME	Kavanagh, Bernard		1.2 NAME		NISKY, JOSEPH				
STREET ADDRESS	RESS 5933 SE WINDSONG LANE		1.3 STREE	T ADDRESS	5851 SE WINDSONG LA	NE		ŀ	
CITY-ST-ZIP	STUART FL 34997 140		1.4 CITY-S	T-ZIP	STUART, FL 34997				
TITLE	S	☐ DELETE	2.1 TITLE		310,111, 12 0,337	-	☐ Change	☐ Addition	
NAME	Byrum, ann		2.2 NAME						
STREET ADDRESS	5957 SW WINDSONG LANE		2.3 STREE	TADORESS	· .			 -	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP					
TITLE			3.1 TITLE				Change	☐ Addition	
NAME	BUTLER, ROBERT		3.2 NAME					i	
STREET ADDRESS	5873 SE WINDSONG LANE		3.3 STREE	T ADDRESS					
CITY-ST-ZIP	STUART FL 34997		3.4. CITY-	ST-ZIP	· '				
TITLE	D	☐ DELETE	4.1 TITLE				Change	☐ Addition	
NAME	NAU, JAMES		4. 2 NAME						
STREET ADDRESS	6472 SE WINDSONG DRIVE	,		T ADDRESS	, ,				
	STUART FL 34997		4.4 CITY-5	- 1					
CITY-ST-ZIP TITLE	D	☐ DELETE	5.1 TITLE	, 1.4 EII			☐ Change	Addition	
	T		5.2 NAME						
NAME	MANDEHR, NORMAN			T ADDRESS					
STREET ADDRESS	6524 SE WINDSONG LANE		5.4 CITY-S						
CITY-ST-ZIP	STUART FL 34997	☐ DELETE	6.1 TITLE	7114IF			Change	☐ Addition	
TITLE	P	☐ nere je					- Originge		
NAME	YETMAN, GEORGE		6.2 NAME						
STREET ADDRESS	5840 SE WINDSONG LN.			TADORESS :				1	
CITY OF 7ID	STIJART FI		6.4 CITY-5	ST-ZIP				l	

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 ar on an attachment with an address, with all other like empowered.

SIGNATURE:

AND TOOL SEQUIRE LINES OF A PRINTED NAME OF SIGNING OF

Jan 21, 1999 511-220-3684

CR2E037 (11/98)