

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 12: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **770441** (4)

1. Corporation Name

**EAST LAKE WOODLANDS WOODS LANDING TOWNHOMES UNIT
ONE ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

3490 E LAKE RD
SUITE C
PALM HARBOR FL 34685
US

P.O. BOX 1448
SUITE C
PALM HARBOR FL 34682-448
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/27/1983** 3a. Date of Last Report **04/28/1994**

4. FEI Number **59-2381011** 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCANNAVINO, DOMINICK
% MANAGEMENT AND ASSOCIATES
3490 E. LAKE RD, SUITE C
PALM HARBOR FL 34685

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title of registrant

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME DICKSON, JAMES DOUGLAS
STREET ADDRESS 195 WOODSLANDING TR.
CITY - ST - ZIP OLDSMAR FL

11 TITLE DT Change Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

TITLE VD
NAME GOLDSMITH, PATTI
STREET ADDRESS 30 LANDING WAY
CITY - ST - ZIP OLDSMAR FL

21 TITLE DP Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE D
NAME GLADIEUX, MARILYN J
STREET ADDRESS 20 LANDING WAY
CITY - ST - ZIP OLDSMAR FL

31 TITLE DS Change Addition
32 NAME MARTORANO, TERRI
33 STREET ADDRESS 505 WOODS LANDING TRAIL
34 CITY - ST - ZIP OLDSMAR FL

TITLE D
NAME JOHNSON, WILLIAM
STREET ADDRESS 210 WOODSLANDING TR.
CITY - ST - ZIP OLDSMAR FL

41 TITLE D Change Addition
42 NAME GAGE, DEE
43 STREET ADDRESS 240 WOODS LANDING TRAIL
44 CITY - ST - ZIP OLDSMAR FL

TITLE D
NAME MARINO, ANTHONY
STREET ADDRESS 105 WOODS LANDING TRAIL
CITY - ST - ZIP OLDSMAR FL

51 TITLE D Change Addition
52 NAME GAGE, DAVID
53 STREET ADDRESS 260 WOODS LANDING TRAIL
54 CITY - ST - ZIP OLDSMAR FL

TITLE D
NAME ROBERTS, BARBARA
STREET ADDRESS 405 WOODS LANDING TRAIL
CITY - ST - ZIP OLDSMAR FL

61 TITLE D Change Addition
62 NAME ROBERTS, BARBARA
63 STREET ADDRESS 405 WOODS LANDING TRAIL
64 CITY - ST - ZIP OLDSMAR FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

James D. Dickson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES D. DICKSON

4-26-95

(813) 785-2351

Date

Telephone Area #

770441

EAST LAKE WOODLANDS WOODS LANDING TOWNHOMES UNIT ONE
ASSOCIATION, INC.

ADDITIONAL DIRECTORS

D
KEENY, GUY
225 WOODS LANDING TRAIL
OLDSMAR FL