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Mar 03 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 771258 (1)

1. Corporation Name

COUNTRY LAKES WEST PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O CMD MANAGEMENT  
3082 JOG ROAD  
LAKE WORTH FL 33467  
US

C/O CMD MANAGEMENT  
3082 JOG ROAD  
LAKE WORTH FL 33467-2053  
US

3. Date Incorporated or Qualified  
11/15/1983

3a. Date of Last Report  
08/14/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

59-2659583

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

8. 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

ROSENTHAL, DAVID C  
C/O CMD MANAGEMENT INC  
3082 JOG ROAD  
LAKE WORTH FL 33401

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 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 *David C. Rosenthal*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/30/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	PLANT, DON	
STREET ADDRESS	7794 BLAIRWOOD CIRCLE NORTH	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	PLANT, DONALD	
STREET ADDRESS	7994 BLAIRWOOD CIRCLE NORTH	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	SCHOEPP, ANN	
STREET ADDRESS	7871 BURLWOOD LANE	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DILAPI, JOSEPH	
STREET ADDRESS	5254 CANAL CIRCLE WEST	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HUNTER, JOYCE	
STREET ADDRESS	5288 HARWOOD LN	
CITY - ST - ZIP	LAKE WORTH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PURE, TRACY	
STREET ADDRESS	5227 CANAL CIRCLE WEST	
CITY - ST - ZIP	LAKE WORTH FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	VD <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Hughis, Hebbie
2.3 STREET ADDRESS	5211 Canal Circle West
2.4 CITY - ST - ZIP	Lake Worth, FL 33467
3.1 TITLE	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Wayne Gordon
3.3 STREET ADDRESS	7927 Bishopwood Road
3.4 CITY - ST - ZIP	Lake Worth, FL 33467
4.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Joyce Hunter
4.3 STREET ADDRESS	5266 Harwood Lane
4.4 CITY - ST - ZIP	Lake Worth, FL 33467
5.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Joseph DiLapi
5.3 STREET ADDRESS	5254 Canal Circle West
5.4 CITY - ST - ZIP	Lake Worth, FL 33467
6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Raymond Scott
6.3 STREET ADDRESS	5274 Edgewood
6.4 CITY - ST - ZIP	Lake Worth, FL 33467

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: *Donald R. Plant* REQUIRED 2/21/97

(561) 967-4993

CR2E037 (9/96)