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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N00269

(3)

GEORGE'S LIGHTHOUSE POINT HOMEOWNERS ASSOCIATION , INC.

Mailing Address



	of Business	Mailing Address							
230 JOHN KNO TALLAHASSEE	OX ROAD, SUITE 2 : FL 32303	230 JOHN KNOX ROAD TALLAHASSEE FL 3230							
						3. Date Incorporated or Qualified 12/09/1983	3a. Dat	e of Last)4/14/1	Report 995
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number	-1	1	Applied For
1	-	26				59-2530607			Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		-	Additional
2		27							Required
City & State		City & State				Election Campaign Financing Trust Fund Contribution		•	O May Be d to Fees
3		28 Zip	Cou	ntry		This corporation has liability for	intangible ta		
Zφ	Country 25	29	30	ı ili y			Yes 🗀		100.0027
4	9. Name and Address of Curr		1001			10. Name and Address of New	Registered A	gent	
	<u> </u>			81 1	Name				
DRAKE, \	VAN			B2 5	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
	IN KNOX RD., SUITE 2			62 `	alleet Add	areas (F.O. Box Hamber to Hove heepfe			
	ASSEE FL 32303			83					
IACCAIA	ADOLL I C OLOGO			84 (Oit.			85 Zi	p Code
					City	oration submits this statement for the pu	FL		•
SIGNATURE	h, and accept the obligations of, S						DATE		
	Signature, typed or printed hame of registered a	gent and title Lapplicable (NC	OTE: Registered	d Agent si	ignature require	ed when reinstating)			
		gent and title Tappicable (NG AND DIRECTORS	OTE: Registered		ignature require	ed wher reinstating) ADDITIONS/CHANGES TO OF	FICERS AND		
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Too hereby 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: __

TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)