## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # NO0579

(5)

TWELVE OAKS VILLAS CONDOMINIUM ASSOCIATION, INC.  Principal Place of Business Malling Address  7212 DAIOUIRI LANE P.O. BOX 12 TAMPA FL 33634  TAMPA FL 33634  TOPIC TAMPA FL 33634								
TAMPA EL 336	34	IAMPA FL	33034-3027			3. Date incorporated or Qualified 12/23/1983	3a. Date of La 01/31/	
	Place of Business	<del></del>	g Address	***************************************		4. FEI Number 59-2426836		Applied For
Suite, Apt	. #, etc.	<b></b>	Apt. #, etc.			5. Certificate of Status Desired		Not Applicable  5 Additional e Regulred
City & Sta	te	City 8	State			6. Election Campaign Financing		00 May Be
23		28				Trust Fund Contribution	Add	ded to Fees
Ζιρ <b>24</b>	Country	Zip 29		Country 30	y 	8. This corporation has liability for Florida Statutes	intangible tax und Yes No	ler s. 199.032,
	9. Name and Address of Curre	ent Registered /	Agent	81	Name	10. Name and Address of New Re	glatered Agent	
6207 PII TAMPA	er, nancy K. Na colada court Fl 33634			82 83	Kimm Street Ad 7207 Tamp	el Frances M dess (P.O. Box Number Is Not Acceptal Daiguiri Lane a. Fl 33634	F1  85	Zip Code
office or		to of Elevido Cue	ik ahanaa waa i	nutharized h	u the corner	ration's board of disorters. I become acco	nt the empaintmen	4 66 406 64000
office or agent. It is SIGNATURE  12. ITILE	Signature, typed or printed name of registered a OFFICERS A		bie (NOT	n NCC.	s <i>111. t</i>	orporation submits this statement for the pration's board of directors. I hereby acceding the property of the	<u> 4-19-97</u> DATE	TORS IN 12
SIGNATURE	Signature typed or printed name of registered a OFFICERS A VO SHRADER, ROBERT H. 6205 PINA COLADA CT.	(1971).e. agent and little if applica	f Fr	E. Registered Ag  13.  1.1 TITLE  1.2 NAME	S M. f ent eignature red	JMME Julied when reinstating)	<u>4-19-97</u> Date CERS AND DIREC	TORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP	Styreture typed or printed name of registered a OFFICERS A VD SHRADER, ROBERT H. 6205 PINA COLADA CT. TAMPA FL	(1971).e. agent and little if applica	DELETE	E. Registered AQ 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	S 111 . T yerk elignature red	JMME Julied when reinstating)	H-19-97 DATE CERS AND DIREC	TORS IN 12
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I. 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 517, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.
Frauces
M. Milm me

SIGNATURE

TRUNCES MY PROSING OFFICER OR DIRECTOR

4-19-97 (813)885-7587

**FILED** 

Apr 30 1997 8:00am

Secretary of State

Daytime Phone # 0048062