

FILE NOW: FILING FEE IS \$61.25

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Apr 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N00579** (5)
1. Corporation Name
TWELVE OAKS VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 7212 DAIQUIRI LANE P.O. BOX 12 TAMPA FL 33634	Mailing Address 7212 DAIQUIRI LANE P.O. BOX 12 TAMPA FL 33634
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2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 12/23/1983	4. FEI Number 59-2426836	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. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No		

9. Name and Address of Current Registered Agent KIMMEL, FRANCES M 7207 DAIQUIRI LANE TAMPA FL 33634	10. Name and Address of New Registered Agent 81 Name Mike Weill 82 Street Address (P.O. Box Number is Not Acceptable) 6201 Amaretto Lane 83 Tampa, FL 33634 84 City FL 85 Zip Code 33634
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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 Michael A. Weill DATE 4-14-98

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	STO ☒ DELETE
NAME	KIMMEL, FRANCES M
STREET ADDRESS	7207 DAIQUIRI LANE
CITY-ST-ZIP	TAMPA FL
TITLE	D ☒ DELETE
NAME	WARD, SUSAN A.
STREET ADDRESS	6207 PINA COLADA COURT
CITY-ST-ZIP	TAMPA FL
TITLE	PD ☒ DELETE
NAME	WALKER, H. L
STREET ADDRESS	4645 BAY CREST DRIVE
CITY-ST-ZIP	TAMPA FL
TITLE	D PD ☐ DELETE
NAME	WEILL, MIKE
STREET ADDRESS	6201 AMARETTO LANE
CITY-ST-ZIP	TAMPA FL
TITLE	Anthony G. Pianos ☐ DELETE
NAME	1209 Daiquiri Lane
STREET ADDRESS	Tampa, FL, Treas.
CITY-ST-ZIP	
TITLE	Robert Schrader ☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Weill, Mike ☒ Change ☒ Addition
1.2 NAME	6201 Amaretto Lane
1.3 STREET ADDRESS	Tampa, FL PD
1.4 CITY-ST-ZIP	33634
2.1 TITLE	VP ☐ Change ☒ Addition
2.2 NAME	Robert Schrader
2.3 STREET ADDRESS	6205 Pina Colada Ct
2.4 CITY-ST-ZIP	Tampa, FL 33634
3.1 TITLE	TD ☐ Change ☒ Addition
3.2 NAME	Anthony G. Pianos
3.3 STREET ADDRESS	7209 Daiquiri Ln.
3.4 CITY-ST-ZIP	Tampa, FL 33634
4.1 TITLE	SD ☐ Change ☒ Addition
4.2 NAME	Luis Parker
4.3 STREET ADDRESS	6209 Amaretto Ln.
4.4 CITY-ST-ZIP	Tampa, FL 33634
5.1 TITLE	D ☐ Change ☒ Addition
5.2 NAME	Luis Vega
5.3 STREET ADDRESS	6203 Amaretto Ln.
5.4 CITY-ST-ZIP	Tampa, FL 33634
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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, or on an attachment with an address.

SIGNATURE: Michael A. Weill MICHAEL A. WEILL 4-14-98 813-886-3789

CR2E037 (10/97)