FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED						
Feb 05 1	998 8:00am					
Secreta	ary of State					

Ī	MENT # NO112				
PAHK	LAKE MASTER ASSOCIATI	ON, INC.		I IBBOOLEE AND EARLY CORE VIEW AND EARLY EARLY	
Principal Plac	e of Business	Mailing Address			ATOM ANDIN ONDIN ETEM ANDIN 1001
700 OVERLOO	K DRIVE	700 OVERLOOK DRIVE			
WINTER HAVEN FL 33884 WINTER HAVEN FL 33884			3. Date Incorporated or Qualified 01/27/1984		
				4. FEI Number	Applied For
<u> </u>				59-2698700	Not Applicable
2. Principal P	Place of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	Fee Required \$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & Stat	€	City & State	.,	7. Is this nonprofit corporation a homeown	ers association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registered	i Agent
CASSIO	y, albert B.			· · · · · · · · · · · · · · · · · · ·	
	ERLOOK DR		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	HAVEN FL 33880		83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 617 050	2 and 617 1508 Florida Statute	es the shove-named corr	Constitute submitted this statement for the purpose	
office or r	egistered agent, or both, in the State	of Florida, Such change was a ations of Section 617 0503. Flo	authorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	arrama war, and goods the oblig	anona di, doction di 11.0000, i ic	orda Statutes.		
12.	Signature, typed or printed name of registered age	ent and title if applicable (NOT) D DIRECTORS	E: Registered Agent signature requi		D DIDEOTODO III 40
TITLE	VPD OPPICERS AIN	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	CASSIDY, STEVEN		1.2 NAME		
STREET ADDRESS	700 OVERLOOK DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL	T beiere	1.4 CITY-ST-ZIP		
TITLE NAME	STD RHINEHART, CAROL C.	DELETE	2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	2988 PLANTATION ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		2. 4 CITY-ST-ZIP	•	
TITLE	PD	☐ DELETE	3.1 TITLE		Change Addition
NAME	CASSIDY, ALBERT B.		3.2 NAME		
STREET ADDRESS	2932 PLANTATION RD SE WINTER HAVEN FL		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	AMAICU LIMACIA LE	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		<u> </u>	4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	artifu that the information equation is	Ith this filing does not qualify to	6.4 CITY+ST+ZIP	Section 110 07/9/i) Elected Stated A Line	artiful that the information
indicated	on this annual report or supplied with this annual report or supplemental director of the corporation or the re-	ior one timing does not quality to it annual report is true and accompany or trustee empowered to a	urate and that my signatures records	Section 119.07(3)(i), Florida Statutes. I further one shall have the same legal effect as if made united by Chapter 617. Florida Statutes: and that	nder oath; that I am an
Block 12	or Block 13 if changed, or on an analysis	ment with en address.		uired by Chapter 617, Florida Statules; and that	my name appears in