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FILED
Apr 28 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 # **N01509** (1)
1. Corporation Name
CARROLLWOOD HOMEOWNERS ASSOCIATION, INC., OF TALLAHASSEE



Principal Place of Business: **2029 HANOVER CT. TALLAHASSEE FL 32303**
Mailing Address: **2029 HANOVER CT. TALLAHASSEE FL 32303-2500**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/17/1984	3a. Date of Last Report 04/25/1996
21. Suite, Apt. #, etc.	22. City & State	23. Zip	24. Country	4. FEI Number 59-2902479	Applied For Not Applicable
25. Country	26. Suite, Apt. #, etc.	27. City & State	28. Zip	29. Country	30. Country
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent
**HANCOCK, EDNA
2029 HANOVER CT.
TALLAHASSEE FL 32303**

10. Name and Address of New Registered Agent
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 Edna Hancock Edna Hancock DATE 4/17/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD HANCOCK, EDNA 2029 HANOVER CT TALLAHASSEE FL	1.1 TITLE	PD Anglin, Bertie 4803 Heath Dr. Tallahassee, FL 32308
NAME	VD CARLTON, STACY 2058 CANEWOOD CT. TALLAHASSEE FL 32303	1.2 NAME	VD Hodges, Anella 2080 Hanover Ct. Tallahassee, FL 32303
STREET ADDRESS	VD MCNULTY, WILLIAM 2083 HANOVER COURT TALLAHASSEE FL	2.1 TITLE	SD Stephens, Ernest 2044 Hanover Ct. Tallahassee, FL 32303
CITY-ST-ZIP	SD HOURIGAN, STEVE 1621B METROPOLITAN BLVD. TALLAHASSEE FL 32308	2.2 NAME	TD Hancock, Edna 2029 Hanover Ct. Tallahassee, FL 32303
CITY-ST-ZIP	TD CARLTON, GAIL 2058 CANEWOOD CT TALLAHASSEE FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
CITY-ST-ZIP		3.1 TITLE	
CITY-ST-ZIP		3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
CITY-ST-ZIP		4.1 TITLE	
CITY-ST-ZIP		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
CITY-ST-ZIP		5.1 TITLE	
CITY-ST-ZIP		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	
CITY-ST-ZIP		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

CR2E037 (9/96)