

Amended

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
99 JUN 24 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N05654  
1. Corporation Name  
AMERICAN CONDOMINIUM PARKS-ZEPHYRHILLS, A CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business: 35106 CONDOMINIUM BLVD. ZEPHYRHILLS FL 33541  
Mailing Address: 35106 CONDOMINIUM BLVD. ZEPHYRHILLS FL 33541



21. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 10/15/1984
22. Suite, Apt. #, etc.	2b. Suite, Apt. #, etc.	4. FEI Number 59-2721252
23. City & State	2c. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Zip	2d. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent David J. Murphy, Att. at Law Greenfelder, Mander, Hanson, Murphy and Dwyer 14217 Third Street Dade City, Florida 33525	10. Name and Address of New Registered Agent
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)
83.	84. City
	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 617.0507 Florida Statutes.

SIGNATURE: *Ruthann Kleinhans* DATE: 6/22/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PDT NAME: HERENDEEN, E.C. STREET ADDRESS: 4847 BRITNI WAY, 214 CITY-ST-ZIP: ZEPHYRHILLS FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE: PD 1.2 NAME: William Renner 1.3 STREET ADDRESS: 35108 Condo Blvd 1.4 CITY-ST-ZIP: Zephyrhills, FL 33541	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VPD NAME: DAVIS, CLYDE STREET ADDRESS: 35038 CONDO. BLVD., LOT 290 CITY-ST-ZIP: ZEPHYRHILLS FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE: VPD 2.2 NAME: Jack Smith 2.3 STREET ADDRESS: 4732 Stuey Dr. 2.4 CITY-ST-ZIP: Zephyrhills, FL 33541	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: SD NAME: BURNS, DOROTHY STREET ADDRESS: 35046 DANNY DRIVE, LOT 142 CITY-ST-ZIP: ZEPHYRHILLS FL 33541	<input checked="" type="checkbox"/> DELETE	3.1 TITLE: SD 3.2 NAME: Ruthann Kleinhans 3.3 STREET ADDRESS: 35052 Garber Ln 3.4 CITY-ST-ZIP: Zephyrhills, FL 33541	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	4.1 TITLE: TD 4.2 NAME: Barbara Calareso 4.3 STREET ADDRESS: 4845 Elwana Way 4.4 CITY-ST-ZIP: Zephyrhills, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	6.1 TITLE: 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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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, with all other like empowered.

SIGNATURE: *Ruthann Kleinhans* DATE: 4/15/99 813-783-73980A  
SECRETARY OF STATE  
DATE: 6/28/99