

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



STATE OF FLORIDA  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

95 MAY -1 AM 11:14

DOCUMENT # **N05849** (7)

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**LAS PAMPAS COMMUNITY ASSOCIATION, INC.**

1. Principal Office Address		3418 NW 37TH AVE GAINESVILLE FL 32605		3. Filing Period (month and quarter)		10/25/1984	
2a. Mailing Address		3418 NW 37TH AVE GAINESVILLE FL 32605		3b. Date of Last Report		05/01/1994	
21. Filing Period (month and quarter)		22. Mailing Address		4. Filing Number		59-2634251	
22. Filing Period (month and quarter)		23. Mailing Address		5. Certificate of Status (Required)		<input type="checkbox"/> \$8.75 Additional Fee Required	
23. Filing Period (month and quarter)		24. Mailing Address		6. Fee for Late Filing (Required)		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Filing Period (month and quarter)		25. Mailing Address		7. Fee for Late Filing (Required)		<input type="checkbox"/> \$68.75 Supplemental Fee Not Required	
25. Filing Period (month and quarter)		26. Mailing Address		8. The corporation has adopted the rules of the Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
STOUT, JACK D 3514 NW 37 AVE GAINESVILLE FL 32605		B1 Name: <b>Camie Cummings</b> B2 Current Address: <b>3507 NW 37th Ave</b> B3 <b>Gainesville, FL 32605</b> B4 City: <b>FL 32605</b>	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that the same is true and correct to the best of my knowledge and belief. I hereby accept the appointment as registered agent.

SIGNATURE: *Wanda Carter* / *Camie M. Cummings*      3/14/95

12. NAME: <b>PD STOUT, JACK D</b> 3514 NW 37 AVE GAINESVILLE FL	13. NAME: <b>PD Camie Cummings</b> 3507 NW 37th Ave Gainesville, FL 32605
14. NAME: <b>VD LAWRENCE, SHIRLEY</b> 3468 NW 37TH AVE. GAINESVILLE FL	
15. NAME: <b>STD CARTER, WANDA</b> 3438 NW 37TH AVE. GAINESVILLE FL	
16. NAME: _____	
17. NAME: _____	
18. NAME: _____	
19. NAME: _____	
20. NAME: _____	
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28. NAME: _____	
29. NAME: _____	
30. NAME: _____	

# Deposited by Bank *llc*

SIGNATURE: *Wanda Carter* / *Camie M. Cummings*      3/14/95      3/14/95

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR