SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNITAL DEDORT



FLORIDA DEPARTMENT OF STATE

ANNU	RPORATION JAL REPORT 1998		Sandra B. Secretary DIVISION OF CO	of State		98 8:00am y of State
DOCUI	MENT # N	10613	(0)	•	Scoretary	y of State
HONEY I	LAKE HOMEOWN	IERS ASSOCIA	ATION, INC.			
Principal Place	e of Business		Malling Address		1 10041401 841 (1811 08114 B1151 (1884 1111 8191	i AiAif alain Biati aiati aisii 1801
961 SW 133RD TERR DAVIE FL 33325-625 US 961 SW 133RD TERR DAVIE FL 33325-625 US				3. Date Incorporated or Qualified 08/08/1985 4 FEI Number	1	
					65-0116328	Not Applicable
2. Principal P 21 960	Place of Business ろい)3件	4VE 2	a. Mailing Address 9605W	134 AVE	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.		2	Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State		= L 21	City & State DAVIE	FL	7. Is this nonprofit corporation a homeowi	ners association?
24 333	Count		Zip	Country SA	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
	9. Name and Addr	ess of Current Rep	jistered Agent	81 Name	10. Name and Address of New Register	ed Agent
FRED NOR	RTH				Address (P.O. Box Number is Not Acceptable)	
96PSW 134TH AVE				touross (1.0. pox rumber is not notopiatoly)		
DAVIE FL	33 325			83		
				84 City	F	85 Zip Code
11. Pursuant t	to the provisions of sect	ions 617,0502 and 6	17.1508, Florida Statutes, t	he above-named cor	poration submits this statement for the purpose of a ation's board of directors. I hereby accept the appo	
office or re agent. I ar	egistered egent, or both m familiar-with, and acc	, in the State of Flor	nda. Such change was sutr	ionizea by the corpor	ation's board of directors, I necept accept the appo	Dilititieur as redistered
	Juls	1011	of, section 617.0503, Florid かいこれ	a Statutes.		
E COLLUNE	typed or printed name	e of registered agent and the	PLOD NORTH Ile II applicable. (NOTE	: Registered Agent signatur	e required when reinstating) DATE	
12.	typed or printed name	10UC	PLGO NURTH He Happlicable. (NOTE RECTORS		required when reinstating) ADDITIONS/CHANGES TO OFFICERS	
12. TITLE NAME	VPD	e of registered agent and the	PLOD NORTH Ile II applicable. (NOTE	: Registered Agent signature	ADDITIONS/CHANGES TO OFFICERS PRESIDENT ARTH	
TITLE NAME	typed or printed name	OFFICERS AND DI	PLGO NURTH He Happlicable. (NOTE RECTORS	E: Registered Agent signature 13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS PRESIDENT FRED NORTH 960 SW 134 AVE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PACELLA, NICK 9361 SW 133RD TE	OFFICERS AND DI	PLGO NURTH He Happlicable. (NOTE RECTORS	E: Registered Agent algoratum 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PRESIDENT FRED NORTH 960 SW 134 AVE DAVIE FL 33325	AND DIRECTORS IN 12 Change Addition CEGS CONTROL AND DIRECTORS IN 12 Addition SECOND
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VPD PACELLA, NICK 9381 SW 133RD TE DAVIE FL SO POULIN, SUSAN	OCC of registered agent and the OFFICERS AND DIE ERR	PECTO NO.2711 Ile H applicable. (NOTE RECTORS DELETE	E: Registered Agent algoratum 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICERS PRESIDENT FRED NORTH 960 SW 134 AVE DAVIE FL 33325 V. PRESIDENT GENE MYNATT	AND DIRECTORS IN 12 Change Addition CEGS CONTROL AND DIRECTORS IN 12 Addition SECOND
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