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Secretary of State

04-19-1999 90113 031 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N11841
 1. Corporation Name
LAUREL HOLLOW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 275 LAUREL HOLLOW DRIVE NOKOMIS FL 34275	Mailing Address 275 LAUREL HOLLOW DRIVE NOKOMIS FL 34275
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 10/31/1985
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2717070
City & State 23	City & State 28	Applied For Not Applicable
Zip 24	Country 25	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
	Zip 29	Country 30
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
MILLER, H. LEWIS
292 LAUREL HOLLOW DRIVE
NOKOMIS FL 34275

10. Name and Address of New Registered Agent
 81 Name **Keys-Caldwell, Inc.**
 82 Street Address (P.O. Box Number is Not Acceptable)
250 TAMPA AVENUE WEST
 83
 84 City **Venice** FL 85 Zip Code **34285**

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 *Katherine R. Caldwell* **Keys-Caldwell Inc** DATE **4/15/99**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	DAVIS, PAUL	
STREET ADDRESS	320 LAUREL HOLLOW DRIVE	
CITY-ST-ZIP	NOKOMIS FL-34275	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	CONROY, KENNETH	
STREET ADDRESS	303 LAUREL HOLLOW DRIVE	
CITY-ST-ZIP	NOKOMIS FL 34275	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	MOEDHAMMER, SHIRLEY	
STREET ADDRESS	250 LAUREL HOLLOW DR	
CITY-ST-ZIP	NOKOMIS FL 34275	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KERN, GUNTHER	
STREET ADDRESS	211 LAUREL HOLLOW DRIVE	
CITY-ST-ZIP	NOKOMIS FL 34275	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	WEBER, HELMUTH	
STREET ADDRESS	254 LAUREL HOLLOW DRIVE	
CITY-ST-ZIP	NOKOMIS FL 34275	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Connors, Michael	
1.3 STREET ADDRESS	222 Laurel Hollow Dr.	
1.4 CITY-ST-ZIP	Nokomis, FL 34275	
2.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Modeen, Russell	
2.3 STREET ADDRESS	311 Laurel Hollow Dr.	
2.4 CITY-ST-ZIP	Nokomis, FL 34275	
3.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Begy, John	
3.3 STREET ADDRESS	200 Laurel Hollow Dr.	
3.4 CITY-ST-ZIP	Nokomis, FL 34275	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Breakiron, Jack	
4.3 STREET ADDRESS	220 Laurel Hollow Dr.	
4.4 CITY-ST-ZIP	Nokomis, FL 34275	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		

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