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May 15 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 # N12466 (1)

1. Corporation Name  
OLD HILLSBOROUGH ESTATES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address  
P O BOX 2081 SEFFNER FL 33584 P O BOX 2081 SEFFNER FL 33583-2081

3. Date Incorporated or Qualified 12/10/1985 3a. Date of Last Report 04/25/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2816940 Applied For Not Applicable  
22. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required  
23. City & State 28. City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
24. Zip Country 29. Zip Country 30. 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent  
RUSSELL, GLADYS  
222 HALTON CR  
SEFFNER FL 33584  
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE President Change Addition  
1.2 NAME PAUL ASCHER  
1.3 STREET ADDRESS 201 HALTON CIR  
1.4 CITY-ST-ZIP Seffner FL 33584  
2.1 TITLE VICEPRESIDENT Change Addition  
2.2 NAME RANDY RIGGS  
2.3 STREET ADDRESS 221 HALTON CIR  
2.4 CITY-ST-ZIP Seffner FL 33584  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ERIC NELSON Change Addition  
6.2 NAME 305 HALTON CIR  
6.3 STREET ADDRESS Seffner FL 33584  
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.

SIGNATURE: Gladys Russell, Treasurer 1-12-97 813 654-2415  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0046378

CR2E037 (9/96)