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May 20 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 # N17160 (5)

1. Corporation Name

CORNERSTONE CENTRE PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3830 TAMPA RD., SUITE 200
PALM HARBOR FL 34684

3830 TAMPA RD., SUITE 200
PALM HARBOR FL 34684-3805

3. Date Incorporated or Qualified 10/07/1986
3a. Date of Last Report 02/08/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt #, etc.

Suite, Apt #, etc.

22

City & State

City

23

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number 59-2712885
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALBERGO, ROBERT P
3830 TAMPA RD, STE 300
PALM HARBOR FL 34684

81 Name

82 Street

83

84 City

STEVEN MEZER, PA

1212 COURT ST, SUITE B
CLEARWATER, FL 34616

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

Signatures, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

5-10-97

DATE

12. OFFICERS AND DIRECTORS DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE PD
NAME ALBERGO, ROBERT P
STREET ADDRESS 3830 TAMPA ROAD, STE 300
CITY-ST-ZIP PALM HARBOR FL

1.1 TITLE PD / TD / SD Change Addition
1.2 NAME HARRIS, George D.
1.3 STREET ADDRESS 3830 TAMPA ROAD, SUITE 500
1.4 CITY-ST-ZIP PALM HARBOR, FL. 34684

TITLE VD
NAME GARNER, LARA
STREET ADDRESS 2240 BELLEAIR ROAD, STE. 215
CITY-ST-ZIP CLEARWATER FL

2.1 TITLE D
2.2 NAME KERRY ROBSON
2.3 STREET ADDRESS 3820 TAMPA ROAD STE 201
2.4 CITY-ST-ZIP PALM HARBOR, FL. 34684

TITLE SD
NAME JOHNSON, ALEX
STREET ADDRESS 3840 TAMPA ROAD
CITY-ST-ZIP PALM HARBOR FL

3.1 TITLE D
3.2 NAME JOHNNY JOHNSON
3.3 STREET ADDRESS 2240 TAMPA ROAD
3.4 CITY-ST-ZIP PALM HARBOR, FL. 34684

TITLE TD
NAME ROBSON, KERRY E
STREET ADDRESS 3820 TAMPA ROAD
CITY-ST-ZIP PALM HARBOR FL

4.1 TITLE D
4.2 NAME DEBRA SNYDER
4.3 STREET ADDRESS 3890 TAMPA ROAD
4.4 CITY-ST-ZIP PALM HARBOR, FL. 34684

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE D
5.2 NAME ED MERCADO
5.3 STREET ADDRESS 3850 TAMPA ROAD
5.4 CITY-ST-ZIP PALM HARBOR, FL. 34684

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George D. Harris 1/15/97

CR2E037 (9/96)