

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 09 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # N19456 (5)**  
1. Corporation Name  
**CANTERBURY OWNERSHIP ASSOCIATION, INC.**



Principal Place of Business <b>3728 N. MAIN STREET GAINESVILLE FL 32609</b>	Mailing Address <b>13803 NW 21 LANE GAINESVILLE FL 32606 US</b>
--	--

3. Date Incorporated or Qualified <b>02/27/1987</b>	
4. FEI Number <b>59-3231785</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 <b>14110 NW 21<sup>st</sup> Lane</b> Suite, Apt. #, etc.	2a. Mailing Address 28 <b>13803 NW 21<sup>st</sup> Lane</b> Suite, Apt. #, etc.
22 City & State 23 <b>Gainesville, Fla.</b>	27 City & State 28 <b>Gainesville Fla</b>
24 Zip <b>32606</b> 25 Country <b>USA</b>	29 Zip <b>32606</b> 30 Country <b>USA</b>

9. Name and Address of Current Registered Agent  
**GUYER, ROBERT L  
13714 NW 21 LANE  
GAINESVILLE FL 32606**

10. Name and Address of New Registered Agent  
81 Name **Kent Weitzel**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**14110 NW 21<sup>st</sup> Lane**  
83  
84 City **Gainesville** FL 85 Zip Code **32606**

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 *Kent Weitzel* **1-31-98**  
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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD CHAU, TERESA B 13803 NW 21 LANE GAINESVILLE FL</b> <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>STD Judy Erickson 13803 NW 21<sup>st</sup> Lane Gainesville, Fla. 32606</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MONTOYA, LUIS 9310 NW 27 PLACE GAINESVILLE FL</b> <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>D Luis Montoya 13926 NW 21<sup>st</sup> Lane Gainesville, Fla. 32606</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Same</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD GUYER, ROBERT L 13714 NW 21 LANE GAINESVILLE FL</b> <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>PD Kent Weitzel 14110 NW 21<sup>st</sup> Lane Gainesville, Fla. 32606</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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: *Kent Weitzel* **1-31-98** **352 331 8683**

CR2E037 (10/97)