FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N24153** **(1)**

1. Corporation Name

MOUNTAIN LAKE COMMUNITY SERVICE, INC.

Principal Place of Business	Mailing Address
MOUNTAIN LAKE 1 ALTERNATE 27 N. P.O. BOX 832 LAKE WALES FL 33859-0832	MOUNTAIN LAKE 1 ALTERNATE 27 N. P.O. BOX 832 LAKE WALES FL 33859-0832

3. Date Incorporated or Qualified: **12/30/1987**
3a. Date of Last Report: **01/30/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
24
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
29
County
30

4. FEI Number: **59-2868636** ☐ 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

NELSON, R.T.
225 E. PARK AVENUE
LAKE WALES FL 33853

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 [illegible]
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	VD PARHTEINAIS, MARIAMNE 90 MOUNTAIN LAKE LAKE WALES FL	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	VD Gadsden, Patricia 91 Mountain Lake Lake Wales, FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BROWN, ANNE 25 MOUNTAIN LAKE LAKE WALES FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CALDER, ROBERT G. J 106 MOUNTAIN LAKE LAKE WALES FL	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	SD Patterson, Eugene F. 14 Mountain Lake Lake Wales, FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KLINE, JEAN 112 MOUNTAIN LAKE LAKE WALES FL	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	PD M Parthenais, Mariamne 90 Mountain Lake Lake Wales, FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ADAMSON, HELEN 79 MOUNTAIN LAKE LAKE WALES FL	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D Adams, Louise 48 Mountain Lake Lake Wales, FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'CONNOR, MARCELLA 21 MOUNTAIN LAKE LAKE, WALES, FL	☒ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	D Behr, E[illegible] Elaine 87 Mountain Lake Lake Wales, FL	☒ Change ☐ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Anne C. Brown Anne C. Brown, Treasurer 1/19/96 941-676-1164
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #