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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N24766

1. Corporation Name
GEORGIANA SETTLEMENT HOMEOWNERS' ASSOC., INC.

131989-90066-21

Principal Place of Business: **STEPHEN SEBESTA, 1060 OLD PARSONAGE DR, MERRITT ISLAND FL 32952 US**
 Mailing Address: **STEPHEN SEBESTA, 1060 OLD PARSONAGE DR, MERRITT ISLAND FL 32952 US**



21	2a.	3.	4.
1010 Old Parsonage Dr	GSHA	02/10/1988	59-2947948
22	27	5.	6.
Merritt Island, FL	Merritt Island, FL	32952 USA	32952 USA
23	28	5.	6.
32952	32952	USA	USA

9.	10.
AMARI, RICHARD S. 98 WILLARD STREET, SUITE 302 COCOA FL 32952	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: DONILON, RAY	1.1 TITLE: PD	1.2 NAME: Vicki Lorenz
STREET ADDRESS: 1115 OLD PARSONAGE DR	CITY-ST-ZIP: MERRITT ISLAND FL	1.3 STREET ADDRESS: 1090 Old Parsonage Dr	1.4 CITY-ST-ZIP: Merritt Island FL
TITLE: SD	NAME: PAUL, LARRY	2.1 TITLE: V	2.2 NAME: Donilon Ray
STREET ADDRESS: 1150 OLD PARSON AVE DR	CITY-ST-ZIP: MERRITT ISLAND FL	2.3 STREET ADDRESS: 1115 Old Parsonage Dr	2.4 CITY-ST-ZIP: Merritt Island FL
TITLE: TD	NAME: SEBESTA, STEVE	3.1 TITLE: TD	3.2 NAME: Stephen A. Bulluck
STREET ADDRESS: 1060 OLD PARSONAGE DR	CITY-ST-ZIP: MERRITT ISLAND FL	3.3 STREET ADDRESS: 1010 Old Parsonage Dr	3.4 CITY-ST-ZIP: Merritt Island FL 32927
TITLE: V	NAME: SCHMIDT, RICK	4.1 TITLE: VD	4.2 NAME: Clovis Linkous
STREET ADDRESS: 1275 OLD PARSONAGE DR	CITY-ST-ZIP: MERRITT ISLAND FL	4.3 STREET ADDRESS: 1210 Old Parsonage Dr	4.4 CITY-ST-ZIP: Merritt Island, FL
TITLE: [] DELETE	NAME: []	5.1 TITLE: []	5.2 NAME: []
TITLE: [] DELETE	NAME: []	6.1 TITLE: []	6.2 NAME: []

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: Stephen A. Bulluck Date: 1-1-99

CR2E037 (11/98)