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Feb 14 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 # N33096 (1)
1. Corporation Name
SOUTHCHASE PARCEL 6 COMMUNITY ASSOCIATION, INC.



Principal Place of Business: P.O. BOX 1911 ORLANDO FL 32802
Mailing Address: P.O. BOX 1911 ORLANDO FL 32802-1911

3. Date Incorporated or Qualified: 06/30/1989
3a. Date of Last Report: 04/25/1996

2. Principal Place of Business: 21 820 Palmway St - 27 820 Palmway St
22 Suite, Apt #, etc.
23 City & State: Kissimmee FL
24 Zip: 34744 25 Country: USA
26 City & State: Kissimmee FL
27 Suite, Apt #, etc.
28 Zip: 34744 29 Country: USA
30
4. FEI Number: 59-3023308
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$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
ROSSI, MEGAN
12504 BRITWELL CT.
ORLANDO FL 32837

10. Name and Address of New Registered Agent
81 Name: Vicki Ferdinandsen
82 Street Address (P.O. Box Number is Not Acceptable): WORLD OF HOMES
83 820 Palmway St.
84 City: Kissimmee FL 85 Zip Code: 34744

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] DATE: 2-3-97
(NOTE: Registered Agent signature required when reinstating)

Table with 12 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox. Rows include MEGAN ROSSI, KAREN DUPONT, and ALEX DEAZUERO.

Table with 13 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and checkboxes for Change/Addition. Rows include Tim Linstad, Tom Mahoney, and Ben Pinsky.

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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)