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Mar 05 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # N35684 (2)  
1. Corporation Name  
WESTON VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address  
P.O. BOX 410312 P.O. BOX 410312  
MELBOURNE FL 32941-0312 MELBOURNE FL 32941-0312  
US US

3. Date Incorporated or Qualified  
12/06/1989  
4. FEI Number  
59-2997274  
Applied For  
Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country 29 Zip 30 Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association?  Yes  No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
GORMAN, ROBERT J  
2602 LOWELL CIRCLE  
MELBOURNE FL 32935

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 *Robert J. Gorman* Robert J. Gorman 2/13/98  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
PD SCHLUSEMEYER, LUCIUS 2870 LOWELL CIRCLE MELBOURNE FL  
VD SANSON, CHESTER C 2605 LOWELL CIRCLE MELBOURNE FL  
SD PALLAS, CYNTHIA A 2603 LOWELL CIRCLE MELBOURNE FL  
TD GORMAN, ROBERT J 2602 LOWELL CIRCLE MELBOURNE FL  
D HUNTER, WILLIAM 2643 LOWELL CIRCLE MELBOURNE FL  
D HELLER, KATHY 2628 LOWELL CIRCLE MELBOURNE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE PD  
1.2 NAME MC LAREN, ROBERT  
1.3 STREET ADDRESS 2635 LOWELL CIRCLE  
1.4 CITY-ST-ZIP MELBOURNE, FL 32935  
2.1 TITLE VD  
2.2 NAME SWANK, JAMES  
2.3 STREET ADDRESS 2642 LOWELL CIRCLE  
2.4 CITY-ST-ZIP MELBOURNE, FL 32935  
3.1 TITLE SD  
3.2 NAME KUHNS, JUNE  
3.3 STREET ADDRESS 2612 LOWELL CIRCLE  
3.4 CITY-ST-ZIP MELBOURNE, FL 32935  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE D  
5.2 NAME CORDES, CHRISTOPHER  
5.3 STREET ADDRESS 2650 LOWELL CIRCLE  
5.4 CITY-ST-ZIP MELBOURNE, FL 32935  
6.1 TITLE D  
6.2 NAME PORTER, KRISTINE  
6.3 STREET ADDRESS 2641 LOWELL CIRCLE  
6.4 CITY-ST-ZIP MELBOURNE, FL 32935

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: *Robert J. Gorman* Robert J. Gorman 2-13-98 (407)254-4702

CR2E037 (10/97)