## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

(5)

DOCUMENT #	N37605	(5)	
CITRUS PARK MOBI	LE HOME OWNERS	ASSOCIATION.	INC.

P.O. BOX 705	
<b>BONITA SPRINGS</b>	FL 33959

Principal Place of Business

Mailing Address

## **FILED** Feb 05 1997 8:00am Secretary of State



P.O. BOX 705 BONITA SPRIN	IGS FL 33959	P.O. BOX 705 BONITA SPRINGS	FL 34133-0705				
					3. Date Incorporated or Qualified 04/09/1990	3a. Date of Last Report 02/13/1996	
2. Principal Pl	lace of Business	2a. Mailing Addres	is		4. FEI Number	Applied For	
21		26			65-0240443	Not Applicable	
Suite, Apt.		27	27 Fee Required		\$8.75 Additional Fee Required		
City & State		City & State	8 State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip		Country 8. This corporation has liability for intangible tax under s. 199.032,		r intangible tax under s. 199.032,	
24	9. Name and Address of Cui	rent Registered Agent	[30]		Florida Statutes  10. Name and Address of New R		
	9. Harrie and Address of Cui	Lett Helistolen Waltt		81 Name	IV. NEITH SITU AGGINGS OF HEW FI	egistered Agent	
COLLEG	O IEE IAV		]				
FIRST L	COLLING, LEE JAY FIRST UNION BLDG  82 Street Address (P.O. Box Number is Not Acceptable)			able)			
	RANGE AVE #1107			83			
ORLANI	DO FL 32801			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_	Signature typed or printed name of registered	d agent and title if applicable	(NOTE: Registered	Agent signature re	(prilatenier nertw beriupe	DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE	PD	DEL.	TE 1.1 TIT	LE	PD CT JUTTIE	ICERS AND DIRECTORS IN 12  Change Addition	
NAME	DUCKWORTH, STANLEY		1.2 NA	ME .	ERNEST LUTTIG	COUPT	
STREET ADDRESS	25624 REDBLUSH CIR.		1.3 ST	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  PD ERN EST LUTTIG ERN EST			
CITY-ST-ZIP	BONITA SPRINGS FL			1.4 CITY-ST-ZIP BONITA OPRINGS / N. 3470			
TITLE	VD	X) DEL	2.1 T(1	LE	VO DUCK WORT	Change Addition	
NAME	BLAIR, JAMES		2.2 NA	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.5 GA 4 RED S IVSh CIRCLE 2.3 STREET ADDRESS 2.5 GA 4 RED S IVSh CIRCLE			
STREET ADDRESS	12401 COMMUNITY DR		2.3 ST				
CITY-ST-ZIP	BONITA SPGS FL	T pti		TY-ST-ZIP	CONTA SPRINGS	Change Addition	
TITLE	SD COCCOONE CLAIDE	L] DEL		Lt.	PIRIRE COSGROV	E Change L'Addition	
NAME	AFRICA OFFICE UNIT COURT		COURT				
STREET ADDRESS	BONITA SPRINGS FL	111	1	REET ADDRESS	Bonto SpRINGS	FL 34135	
CITY-ST-ZIP TITLE	TD	DEL		11-81-41P -	TP -	Change Addition	
NAME	BRADLEY, ANN		4.2 N		ANN BRADLEY	Ct	
STREET ADDRESS	25638 CARNATION			REET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS FL		1 1	TY-ST-ZIP	Bonita Springs	FL 34135	
TITLE	D	DEL		ir I	n	Change Addition	
NAME	GREEN, HAROLD		5.2 NA			VII Ct	
STREET ADDRESS	25966 CEDAR HILL CT			REET ADDRESS	JAROLD GREE 25966 CEDAR H	·// -	
CITY-ST-ZIP	BONITA SPRINGS FL			TY-ST-ZIP	Bonda SPRING	35 FL 34135	
TITLE	D	☐ OEL		LE	D, a la	Change Addition	
NAME	CLAUSEN, HAROLD		6.2 NA	ME 1	HaroLD COCKTON CH		
STREET ADDRESS	25615 CARNATION		6.3 ST	REET ADDRESS	ADDRESS 25966 CCC dar Hill CT.  JOHN SON TO SPRINGS FL 34135  HAROLD Clausen Change Addition  HOROLD CARNOTION CT.		
CITY-ST-ZIP	BONITA SPRINGS FL		6.4 CI	TY-ST-ZIP	Boulla QPIIn	US FLUARUS	
14. I do herel	by certify that the information sup	plied with this filing does n	t qualify for the	exemption sta	ated in Section 119.07(3)(i), Florida Statu	tes. 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.