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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

N38013

(1)

COUNTRYSIDE SOUTH HOMEOWNER ASSOCIATION, INC.

Principal Place of E	Business	Mailing Address					a thankin and trink falls dates mone	1111 61611 616	** #1#11 #1#11 *	39311 A1811 1841	
1405 82ND AVE. VERO BEACH FL		1405 82ND AVE. #780 4 VERO BEACH FL 32966		16							
US		US				3. D	ate Incorporated or Oualified 05/04/1990	1	ate of Last I 04/19/1 9	, I	
2. Principal Place	of Business	2a. Mailing Address				4. FI	El Number		⊢	Applied For	
21		26					65-0187731			Not Applicable	
Suite, Apt. #, e	tc.	Suite, Apt. #, etc.				5 . C	ertificate of Status Desired			Additional Required	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
Zιρ	Country	Zip Cou				B. TI	This corporation has liability for intangible tax under s. 199.032,				
24	25	29	<u> </u>				Florida Statutes Yes No 10, Name and Address of New Registered Agent				
(. Name and Address of Current	Registered Agent		0.1	N.	10. N	lame and Address of New R	egistered	Agent	 	
				B1	Name						
Taylor, James a 2770 Indian River Blvd., Suite 501				82	Street /	vduress (P.O.	. Box Number is Not Acceptab	le)			
	CH FL 32960			83						. <u>.</u>	
				84	 			FL	-	p Code	
or registered :	ne provisions of Sections 617,0502 a agent, or both, in the State of Florida and accept the obligations of, Sectio	i. Such change was authoriz	ea by the :	corp	named co oration's	rporation sub board of dire	units this statement for the pur ctors. I hereby accept the appo	pose of ch pintment as	anging its r s registered	egistered office agent. I am	
SIGNATURE		AIC	VE. D. vistana	 - Aan	t non the or	equired when reins	Patient	DATE			
	ature, typed or printed name of registered agent at OFFICERS AND		13.	JAGE	it signature re		DOITIONS/CHANGES TO OFF	-	D DIRECTO	SRS IN 12	
TITLE	80 /	DELETE	1.1 T	ITLE		DD			Change	☐ Addition	
	DAVIS WILLARD		1.2 N	IAME		HOME	J. HAVLICEK	-	•		
	1405 82 AVE #140		1.3 \$	TREET	ADDRESS	ILLAK	えぇ HVE・ギンス	7	,		
CITY-ST-ZIP	VERO BEACH EL		1.4 0	HTY - S	ST-ZIP	VARO	BEACH, Fl.	<u>3296</u>	6		
TITLE			2.1 7	ITLE					Change	Addition	
	AHEARN ANNA H.		22 N	LAME		Rose	MARY ADEIT				
	1405-62 AVE #35		235	STREET	ADDRESS	111111	Y 2 DY E, 34 11	-011			
CITY-ST-ZIP	VERO BEACH, FL.		2.4	CITY-	\$1-ZIP	VERO	BEACH, FI.3	2766			
TITLE	SD	DELETE	317	ITLE		VP	IN BOUCHER	,	Change	☐ Addition	
	MILLER, ARTHUR		3.2 N	IAME		MART	82 Ave. # 2	24			
STREET ADDRESS	1405-82 AVE #113		3.3 9	STREET	T ADDRESS	14,05	85 UAG. ***	2001	1		
CITY-SI-ZIP	VERO BEACH FL				ST-ZIP	VER	O BEACH, FI.	3 270	Change	☐ Addition	
TITLE	AØ_	DELETE		TITLE		SP	A C ======1	A.f	Charige	Addition	
	NIEDRINGHAUS, ELEANOR			NAME		DANE	T A. SUTHERLI	N			
STREET ADDRESS	1405-62ND AVE #250		1		T ADDRESS	1403	Gean El 37	9/./			
CITY-ST-ZIP	VERO BEACH FL	DELETE			ST-ZIP	VAKO	Bench, Fl. 32	· los	Change	Addition	
TITLE	D			TITLE		12100	MARD FRANKL	ו או.	F-3 Change		
	BOUCHER, MARTIN			NAME		ILLAS .	82 Ave. #274				
	1405 82 AVE #264				T ADORESS	1/EDA	NARD FRANKL 82 Ave., #274 BEACH, Fl. 3	2966	•		
	VERO BEACH FL	DELÉTÉ		TITLE	ST-ZIP			100	Change	Addition	
TITLE	ODICEIN ADMINI			NAME		TALN	THIBEAULT 82 AVE. # 15.3		 •-		
NAME	GRIFFIN, ARTHUR				1 ADDRESS	1405	82 Ave.#153				
l .	1405.82 AVE #13					17000	BEACH, Fl.	329	46		
CITY-ST-ZIP	VERO BEACH FL		■ 64	UI!Y-	ST-ZIP	A CVO	report of the Continue of the	07/01/01 5	Iorida Statu	dee I further	

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)(k), 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 eath; 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: 2

Calait ROSEMARY ADSIT, TREASURER 3/25/96 407/778.5924
DRINTED NAME OF SIGNING OFFICER OR DIRECTOR