

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N38640** (1)

1. Corporation Name
INTERLOCHEN HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: P. O. BOX 7075 N/A, 210 LOCHEN CT, WINTER HAVEN FL 33884 US
Mailing Address: P.O. BOX 7075, WINTER HAVEN FL 33883 US

3. Date Incorporated or Qualified: **06/18/1990**
3a. Date of Last Report: **04/13/1995**

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number	Applied For
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	65-0212524	Not Applicable
23	City & State	28	City & State	6.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
24	Zip	29	Zip	7.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
25	Country	30	Country	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
JOINER, JAMES T. 1105 INTERLOCHEN BLVD WINTER HAVEN FL 33884				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83	101 Lochen Dr. SE		
				84	City	FL	85

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 17.0503, Florida Statutes.

SIGNATURE: *James T. Joiner* DATE: **3/17/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD EASON, DON <input type="checkbox"/> DELETE	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EASON, DON	1.2 NAME	George Lyle
STREET ADDRESS	208 LOCHEN CT	1.3 STREET ADDRESS	204 Lochan Court SE
CITY-ST-ZIP	WINTER HAVEN FL	1.4 CITY-ST-ZIP	Winter Haven, FL 33884
TITLE	VPD LYLE, GEORGE <input type="checkbox"/> DELETE	2.1 TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYLE, GEORGE	2.2 NAME	John Amann
STREET ADDRESS	204 LOCHEN CT SE	2.3 STREET ADDRESS	1105 Interlochen Blvd
CITY-ST-ZIP	WINTER HAVEN FL	2.4 CITY-ST-ZIP	Winter Haven, FL 33884
TITLE	STD JOINER, JAMES <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOINER, JAMES	3.2 NAME	
STREET ADDRESS	101 LOCHEN DR SE	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: *James T. Joiner, Secretary* DATE: **3/17/96** (941) 299-1284 Daytime Phone

CR2E037 (12/95)