FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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N44379

(8)

Principal Place of Business Mailing Address 5000 VARTY RD WINTER HAVEN FL 33884 N44379 (8) VARTY ROAD HOMEOWNERS ASSOCIATION, INC.						
] 					3. Date Incorporated or Qualified 07/19/1991	3a. Date of Last Report 05/01/1996
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Suite Ant	# oto	26 Suite Apt # etc			59-3093549	Not Applica
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has tiability for i	
24	25 9. Name and Address of Cu		30		Florida Statutes 10. Name and Address of New Re	Yes No
·····	B. Hallie alla Addiess di Ct	Mont Hegistered Agent	81	Name	10. Name and Address of New Ne	Bisteled Ydalit
RIITZ H	ELEN JEAN					
5000 VA			82 Street Ad		ddress (P.O. Box Number is Not Acceptable)	
	HAVEN FL 33884		83			~
			84	City		85 Zip Code
			ا"ا	Ony	,	FL FL FL FL FL FL FL FL
SIGNATURE _	Signature, typed or printed name of registers OFFICERS	od agent and title if applicable (NOTE) AND DIRECTORS	: Registered Age	nt signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE			Change Addit
NAME	CASEY, ALLAN	•	1.2 NAME			
STREET ADDRESS	5089 VARTY RD		1.3 STREET	1		
CITY-ST-ZIP	WINTER HAVEN FL SD	DELETE	1.4 CITY - S	1 - 21P		Change Maddi
TITLE NAME	BUTZ, HELEN		2.1 TITLE 2.2 NAME			L Change L Addit
STREET ADDRESS	5000 VARTY ROAD			ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL			IT- ZIP		
TITLE	10	DELETE	3.1 TITLE			☐ Change ☐ Addit
NAME	BLOUIN, DOUGLAS		3.2 NAME			
STREET ADDRESS	5051 VARTY ROAD		3.3 STREET	ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		3.4. CITY-S			——————————————————————————————————————
TITLE	VPD	☐ DELETE	4.1 TITLE	$+$ $+$ \underline{P}	DUNSELL	Change Addit
NAME OTOTET ADDDCCC	LINDSEY, JOHN R		4. 2 NAME	1000000	OHN R. LINDSEY 1098 VARTY RD JINTER HAVEN FL	
STREET ADDRESS	5098 VARTY RD WINTER HAVEN FL		4.3 STREET	AUURESS	LATER HAVEAL E	A
CITY-ST-ZIP TITLE	THREE INTEREST	DELETE	4.4 CITY - S 5.1 TITLE	1-217 4	HERB RUGERS V	/CN Change Addit
NAME			5.2 NAME		TERD KUEEKS \	[] D = []
STREET ADDRESS			5.3 STREE1	BUDBESS I	086 VARTY RD	4
CITY-ST-ZIP				1-ZIP <i>L</i>	UINTER HAVEN	FLA
TITLE	DELETE		6.1 TITLE			☐ Change ☐ Addit
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		

14. I do hereby certify that the intermation 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 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 occupation of the receiver or trustee importance 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.