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Apr 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N50065 (4)
 1. Corporation Name
ANDOVER LAKES, PHASE 2 HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business 2180 WEST SR 434 SUITE 5000 LONGWOOD FL 32779-5044	Mailing Address 2180 WEST SR 434 SUITE 5000 LONGWOOD FL 32779-5044
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3. Date Incorporated or Qualified 07/27/1992	
4. FEI Number 59-3159818	Applied For <input type="checkbox"/> Not Applicable
6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
MOSELER, JOHN A.
2269 LEE ROAD
SUITE 101
WINTER PARK FL 32789

10. Name and Address of New Registered Agent
 81 Name **JAMES W. HART, JR**
 82 Street Address (P.O. Box Number is Not Acceptable)
SENTRY MANAGEMENT, INC.
 83 **2180 WEST SR 434, SUITE 5000**
 84 City **LONGWOOD** FL 85 Zip Code **32779**

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 officer 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]* **JAMES W. HART, JR.** DATE **2/3/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD MOSELER, JOHN A. 2269 LEE ROAD, #101 WINTER PARK FL	1.1 TITLE	PD WAIT, JAMES K. 2884 ST AUGUSTINE DR ORLANDO FL 32825
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD BOSCHMANS, ERIC F J. 2269 LEE RD. WINTER PARK FL	2.1 TITLE	VD LONDON, LEONARD 2926 ST AUGUSTINE DR ORLANDO FL 32825
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	STD PETRY, VERONCA M. 2269 LEE ROAD, #101 WINTER PARK FL	3.1 TITLE	STD CONNELLY, YVETTE 2873 ST AUGUSTINE DR ORLANDO FL 32825
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	TD EKEM, BRENT 11122 JOEL CT ORLANDO FL 32825
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	D YUNCZA, JULIA 2824 ST AUGUSTINE DR ORLANDO FL 32825
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *[Signature]* **JAMES K. WAIT** DATE **4-15-98**

CR2E037 (10/97)