

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 18 PM 11:11

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # N92000000504 (2)

1. Corporation Name

LAGO GRANDE AT PLANTATION BAY HOME OWNER'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

**1166 PELICAN BAY DRIVE
DAYTONA BEACH FL 32119**

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DAYTONA BEACH FL 32119**

3. Date Incorporated or Qualified

3a. Date of Last Report

11/30/1992

05/01/1994

4. FBI Number

Applied For

59-3207717

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NELSON, MICHELE
1166 PELICAN BAY DRIVE
DAYTONA BEACH FL 32119**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signatures required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
STD	FULK, BERNARD B JR	414 LONG COVE COURT	ORMOND BEACH FL 32174
PD	HUSTON, JAMES	401 LONG COVE ROAD	ORMOND BEACH FL 32174
VD	BREWER, THOMAS L	430 HARBOUR TOWN LANE	ORMOND BEACH FL 32174

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
President	VD Thomas L Brewer	430 Harbour Town Lane	Ormond Beach, FL 32174	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vice President	VD James Huston	401 Long Cove Road	Ormond Beach, FL 32174	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Treasurer	VD Bernard B Fulk, Jr	414 Long Cove Court	Ormond Beach, FL 32174	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	VD George Fazella	447 Long Cove Road	Ormond Beach, FL 32174	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Director	VD Gerald Hamly	409 Seabrook Road	Ormond Beach, FL 32174	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Bernard B Fulk*
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

3/28/95
DATE