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May 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N92000000754 (3)

1. Corporation Name
HAMILTON PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
731 HAMILTON PLACE DR. LAKELAND FL 33813 731 HAMILTON PLACE DR. LAKELAND FL 33813-2664

3. Date Incorporated or Qualified 12/11/1992 3a. Date of Last Report 04/19/1996
4. FEI Number 59-3190678 Applied For 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
8. This corporation has liability for intangible tax under s. 199.002, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Country 30 Country

9. Name and Address of Current Registered Agent
LUEBKING, JOANN
731 HAMILTON PLACE DR.
LAKELAND FL 33813

10. Name and Address of New Registered Agent
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 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 617.0503, Florida Statutes.

SIGNATURE Joann Luebking Joann Luebking 4/22/97
Signature, typed or printed name of registered agent and title if applicable. (If not registered agent, signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARRISH, MICHAEL	1.2 NAME	SAME
STREET ADDRESS	942 HAMILTON PLACE LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33813	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MADDOX, E.	2.2 NAME	Peter Smith
STREET ADDRESS	803 HAMILTON PLACE DR.	2.3 STREET ADDRESS	951 Hamilton Pl. Lane
CITY-ST-ZIP	LAKELAND FL 33813	2.4 CITY-ST-ZIP	Lakeland, FL 33813
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MADDOX, CINDY	3.2 NAME	SAME
STREET ADDRESS	803 HAMILTON PLACE DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33813	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUEBKING, JOANN	4.2 NAME	SAME
STREET ADDRESS	731 HAMILTON PLACE DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33813	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORVOTH, JOE	5.2 NAME	Maddox, E
STREET ADDRESS	745 HAMILTON PLACE DRIVE	5.3 STREET ADDRESS	808 Hamilton Pl. Dr.
CITY-ST-ZIP	LAKELAND FL 33813	5.4 CITY-ST-ZIP	Lakeland, FL 33813
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUEBKING, CARL	6.2 NAME	Drenner, DAN
STREET ADDRESS	731 HAMILTON PLACE DRIVE	6.3 STREET ADDRESS	816 Hamilton Pl. Dr.
CITY-ST-ZIP	LAKELAND FL 33813	6.4 CITY-ST-ZIP	Lakeland, FL 33813

14. I do 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: Joann Luebking 4/22/97

CR2E037 (9/96)