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May 15 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 # N93000000086 (9)

1. Corporation Name

SOUTHCHASE PHASE 1B COMMUNITY ASSOCIATION, INC.



Principal Place of Business

Mailing Address

151 SOUTH HALL LANE
SUITE 230
MAITLAND FL 32751
US

151 SOUTH HALL LANE
SUITE 230
MAITLAND FL 32751
US

3. Date Incorporated or Qualified
01/21/1993

3a. Date of Last Report
07/22/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-3167856

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. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

JACK B. HANSON

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

THE INTERSTATE MANAGEMENT GROUP

83

279 PASADENA BLVD #100

84 City

DALLAS

FL

75203

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

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

JACK B. HANSON

4/27/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME ROCHESTER, LAUREL A
STREET ADDRESS 151 SOUTH HALL LANE
CITY-ST-ZIP MAITLAND FL 32751

1.1 TITLE D
1.2 NAME DAREYL COWELL
1.3 STREET ADDRESS 151 SOUTH HALL LANE #230
1.4 CITY-ST-ZIP MAITLAND, FL 32751

TITLE D
NAME TILLEY, WALTER A
STREET ADDRESS 151 SOUTH HALL LANE
CITY-ST-ZIP MAITLAND FL 32751

2.1 TITLE D
2.2 NAME HAROLINE MATTHAE
2.3 STREET ADDRESS 151 SOUTH HALL LANE #280
2.4 CITY-ST-ZIP MAITLAND, FL 32751

TITLE D
NAME KNIGHT, PATRICK J
STREET ADDRESS 151 SOUTH HALL LANE
CITY-ST-ZIP MAITLAND FL 32751

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: [Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/97 402-661-2150

Date Daytime Phone # 0077773

CR2E037 (9/96)