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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000086

1. Corporation Name
SOUTHCHASE PHASE 1B COMMUNITY ASSOCIATION, INC.

Principal Place of Business

151 SOUTH HALL LANE
SUITE 230
MAITLAND FL 32751
US

Mailing Address

151 SOUTH HALL LANE
SUITE 230
MAITLAND FL 32751
US



2. Principal Place of Business

21 1416 Concord St. East

Suite, Apt. #, etc.

23 Orlando FL

24 32803 25 US

2a. Mailing Address

26 PO Box 531010

Suite, Apt. #, etc.

28 Orlando FL

29 32853-1010 30 US

3. Date Incorporated or Qualified

01/21/1993

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

9. Name and Address of Current Registered Agent

~~HANSON, JACK B~~
THE MELROSE MANAGEMENT GROUP
~~229 PAGADENA PLACE #100~~
ORLANDO FL 32803

10. Name and Address of New Registered Agent

81 Name ~~HANSON, JACK B~~
82 Street Address (P.O. Box Number is Not Acceptable)
The Melrose Management Group
83 1416 Concord Street East
84 City Orlando FL 85 Zip Code 32714

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

J. B. Hanson

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/99

12. OFFICERS AND DIRECTORS

TITLE D
NAME COLWELL, DARRYL
STREET ADDRESS 151 SOUTH HALL LANE #230
CITY-ST-ZIP MAITLAND FL 32751 DELETE

TITLE D
NAME MATTHAI, KAROLINE
STREET ADDRESS 151 SOUTH HALL LANE #230
CITY-ST-ZIP MAITLAND FL 32751 DELETE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Brett Lundegvam Change Addition
1.2 NAME
1.3 STREET ADDRESS 385 Douglas Avenue, Ste. 2000
Altamonte Springs, FL 32714
1.4 CITY-ST-ZIP

2.1 TITLE D Matthai, Karoline Change Addition
2.2 NAME
2.3 STREET ADDRESS 385 Douglas Avenue, Ste. 2000
Altamonte Springs, FL 32714
2.4 CITY-ST-ZIP

3.1 TITLE D Knight, Patrick J. Change Addition
3.2 NAME
3.3 STREET ADDRESS 385 Douglas Avenue, Ste. 2000
Altamonte Springs, FL 32714
3.4 CITY-ST-ZIP

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

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

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE: *Katherine Harris*

3-10-99

228-4181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)