FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300000830 (0)

THE SANCTUARY OWNERS ASSOCIATION, INC.

Principal Place of Business

2477 E. CO. MP. CIAL BLVD.

Mailing Address

2477 E. CO. MED JAL BLVD. FT. LAUD JUAGE 10208-40

FILED Jun 16 1997 8:00am Secretary of State



3a. Date of Last Report 04/10/1996

3. Date Incorporated or Qualified 03/15/1993

14344	S.E. 131st Place	P.O. Box 15	580	65-0470977 Not Applied F	
<u> </u>		20		тостры	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	
City & State		City & State		6. Election Campaign Financing \$5.00 May B	3e
	waha, FL	28 Ocklawaha,		Trust Fund Contribution	8
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.0 Florida Statutes Yes Yes	132,
<u>24 32183</u>	25 Marion		<u>Marion</u>	Florida Statutes Yes 1 No 10. Name and Address of New Registered Agent	
I A CO	ORDON W		Der	orah J. Murdock	
			82 Stree	Address (P.O. Box Number is Not Acceptable)	
2477 E. C.				744 B.B. ISISC FIACE	
PI, I DOCUALE PL STAD					
,	•		64 City	lawaha FL 85 Zip Code 32183	,
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508. Florida Statutes.	the above name	d corneration submits this statement for the number of changing its radio	torod
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.					
	m tamiliar with, and accept the obligati	ons of, Section 617,0503, Fioric			
SIGNATUR	Signature, typed or printed name of registered agent.	and title if applicable (NOTE 6	DEDOL ATI	J. Murdock Secretary/Treas4/29/9	9 /
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:	2 6
TITLE		DELETE	1.1 TOTLE	President Director Change XIX A	ddition
NAME	LATZ, SPOON W	Ť	1.2 NAME	Murdock, Michael	1
STREET ADDRESS	2477 E COMMINICATAL BLVD.		1.3 STREET ADDRESS	14344 S.E. 131 st Place	
CITY-ST-ZIP	AUDERDALE FL 8850		1,4 CITY - ST - ZIP	Ocklawaha, FL 32183	1
TITLE	A CHOPERDALE TE GOODS	DELETE	2.1 TITLE	Vice President Director Change XXA	ddition
NAME	WELLIN WILLIAM A		2.2 NAME	Jim Potts	
STREET ADDRESS	4421 NUI TOIN TO		2.3 STREET ADDRESS	les a record to the second	
CITY-ST-ZIP	2011A FL 34475		2.4 CITY-ST-ZIP	Fern Park, FL 32730]
TITLE	850	DELETE	31 TITLE	Vice Presidnet Director Change XX A	ddition
NAME	BOYLE, INVOLENE R		3.2 NAME	Bill Kernan	
STREET ADDRESS	5850 S.W. Carl. Zo., MOCKINGE	RIRN FARM	3.3 STREET ADDRESS	1 .	
CITY-ST-ZIP	CCALA FL 34474-6499		3.4. CITY-ST-ZIP	1 '	
TITLE	CONDATE OTTIT CADO	DELETE	4.1 TITLE	Ocklawaha, FL 32183	ddition
NAME		— •	4. 2 NAME	Secretary/Treasurer 5. Change XX	
STREET ADDRESS			4.3 STREET ADDRESS	Deborah J. Murdock	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Tranda p.p. Inter Place	1
TITLE		DELETE	5.1 TITLE	Ocklawaha, FL 32183	ddition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change ☐ A	ddition
NAME			6.2 NAME		201001
					- 1
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	ov certify that the information supplied	with this filing does not qualify f	6.4 CITY-ST-ZiP	stated in Section 119 07(3)(i) Florida Statutes 1 further certify that the	
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					