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Feb 18 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N93000003604 (6)  
1. Corporation Name  
EGRET COVE AT MAPLEWOOD HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 4 HARVARD CIRCLE, W. PALM BEACH FL 33409, US  
Mailing Address: P.O. BOX 6140, LAKE WORTH FL 33466, US

3. Date Incorporated or Qualified: 08/10/1993  
4. FEI Number: 59-3234615  
Applied For:  Not Applicable:

2. Principal Place of Business: 21 229 PASADENA PLANE, Suite, Apt #, etc.: 22 100  
2a. Mailing Address: 26 P.O. Box 560235, Suite, Apt #, etc.: 27  
City & State: 23 DALLAND, FLORIDA, City & State: 28 DALLAND, FLA  
Zip: 24 32803, Country: 25 USA, Zip: 29 32556-0235, Country: 30 USA

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. Is this nonprofit corporation a homeowners association?  Yes  No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent: DICKINSON, CAROLINE S., 4 HARVARD CIRCLE, W. PALM BEACH FL 33409

10. Name and Address of New Registered Agent: 81 Name: JACK B. HANSON, 82 Street Address (P.O. Box Number is Not Acceptable): 229 PASADENA PLANE 100, 83, 84 City: DALLAND, FL 32803

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] JACK B. HANSON 2/10/98

12. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	WELCH, MARK E.	
STREET ADDRESS	4 HARVARD CIRCLE	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DICKINSON, CAROLINE S.	
STREET ADDRESS	4 HARVARD CIRCLE	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	TPD	<input type="checkbox"/> DELETE
NAME	DUNN, THOMAS P.	
STREET ADDRESS	4 HARVARD CIRCLE	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	LANDSBERG, MARY	
1.3 STREET ADDRESS	4 HARVARD CIRCLE	
1.4 CITY-ST-ZIP	W. PALM BEACH, FL	
2.1 TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DICKINSON, CAROLINE S.	
2.3 STREET ADDRESS	4 HARVARD CIRCLE	
2.4 CITY-ST-ZIP	W. PALM BEACH, FL	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: [Signature] M. LANDSBERG 2/10/98 407-829-0086

CFR2E037 (10/97)