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Jun 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000000467 (0)**

1. Corporation Name

VALENCIA POINTE HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business	Mailing Address
2180 PARK AVENUE, N. SUITE 326 WINTER PARK FL 32789 US	2180 PARK AVENUE, N. SUITE 326 WINTER PARK FL 32789 US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	25 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

3. Date Incorporated or Qualified	01/31/1994
4. FEI Number	59-3232374
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	
PAUL CLAMER, JR. 7053 UNIVERSITY BLVD. SUITE 200 WINTER PARK FL 32792	

10. Name and Address of New Registered Agent	
81 Name	Beth M. Jordan
82 Street Address (P.O. Box Number is Not Acceptable)	2180 N. Park Ave Suite 326
83 City	Winter Park
84 State	FL
85 Zip Code	32789

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 *Beth M. Jordan* DATE *4/20/98*

12. OFFICERS AND DIRECTORS	
TITLE	DPC
NAME	PAUL PALMER, JR.
STREET ADDRESS	7053 UNIVERSITY BLVD.
CITY-ST-ZIP	WINTER PARK FL
TITLE	OV
NAME	RODNEY W. PALMER
STREET ADDRESS	7053 UNIVERSITY BLVD.
CITY-ST-ZIP	WINTER PARK FL
TITLE	DST
NAME	CAROLE ARNOLD
STREET ADDRESS	7053 UNIVERSITY BLVD.
CITY-ST-ZIP	WINTER PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD
1.2 NAME	Anthony, Frank
1.3 STREET ADDRESS	720 McLean Ct.
1.4 CITY-ST-ZIP	Orlando, FL 32825
2.1 TITLE	DV
2.2 NAME	Forrester, Evelyn
2.3 STREET ADDRESS	717 McLean Ct.
2.4 CITY-ST-ZIP	Orlando, FL 32825
3.1 TITLE	DST
3.2 NAME	Holloway, Michael
3.3 STREET ADDRESS	839 McLean Ct.
3.4 CITY-ST-ZIP	Orlando, FL 32825
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
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 *Frank Anthony* DATE *4-27-98*

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