FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

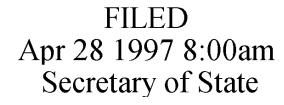
Secretary of State DIVISION OF CORPORATIONS

N94000003512 (0) DOCUMENT

THE COLONY OF THE LAKE HOMEOWNERS ASSOCIATION, I NC.

Principal	Place of	Business
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Mailing Address





% CLAYTONS REALTY 611 N WYMORE ROAD WINTER PARK FL 32789 2. Principal Place of Business		% CLAYTONS REALTY 611 N WYMORE ROAD WINTER PARK FL 32789-2856			Date Incorporated or Qualified 07/15/1994	3a. Date of Last Report 05/20/1996					
		2a. Mailing Address	2a. Mailing Address			4. FEI Number	·	<u> </u>	Арр	lied For	
21		26	26			59-3286231			Not Applicable		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc. 27 City & State 28			5. Certificate of Status Desired		\$8.75 Additional Fee Required				
City & State	9								May Be to Fees		
Zip 24	Country 25	Zip 29	30	ntry		This corporation has liability for in Florida Statutes	ntangible Yes [der s.	199.032,	
	9. Name and Address of Curre	nt Registøred Agent				10. Name and Address of New Re	gistered	Agent			
	E G 'Ons realty Ymore road		ľ	81 82 83	Street A	ddress (P.O. Box Number is Not Acceptab	le)				
	PARK FL 32789		-	84	City		FL.	85	Zip Ci	ode	
SIGNATURE	egistered agent, or both, in the statem familiar with, and accept the oblig					oration's board of directors. I hereby accept equired when re-instaling)	DATE	ointme	m as re	gistered	
12.	OFFICERS AT	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	CTORS	IN 12	
TITLE	PD	DELETE	1.1 10	LE				Ch	ange	Addition	
name Street address	BANKS, E G 611 N WYMORE RD		1.2 NA 1.3 ST		ADDRESS						
CITY - ST-ZIP	WINTER PARK FL 32789	htters	1.4 CI		T-ZIP					F-1	
TITLE	STD	DELETE	2.1 TIT		}			Cha	ange	☐ Addition	
NAME STREET ADDRESS	CLAYTON, W M 611 N WYMORE RD			REET	ADDRESS						
CITY-ST-ZIP TITLE	WINTER PARK FL 32789	DELETE	2. 4 Ct		ST-ZIP			Ch	2000	Addition	
NAME	CLANTON CHARLES WILL	ب مدداد	3.1 III		1				unge.	LL MUUIIDII	
	CLAYTON, CHARLES W III 611 N WYMORE RD				annotee						
STREET ADDRESS	WINTER PARK FL 32789				ADDRESS						
CITY-ST-ZIP TITLE	THINIEN TANK TE SELOS	DELETE	4.1 YIT		ST - ZIP			☐ Chi	ange	Addition	
NAME			4. 2 N/		}						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			1		ST-ZIP						
TITLE	·	DELETE	51 [1]		A 1 E R			Cha	ange	Addition	
NAME			5.2 NA		\						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			5.4 CO								
TITLE		DELETE	6,1 717		51-2IF			☐ Ch.	ange	Addition	
NAME			6.2 NA								
STREET ADDRESS			6351	REET	ADDRESS	•					
CITY-ST-ZIP	a catify that the information cumpli	The state of the s	6.4 (1)			ated in Castion 110 07/2Vi) Florida Ctatuta					

I do nereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(). 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 abbress.