

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N95000001188 (0)

1. Corporation Name

LEALMAN TRAILER COURT HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

3301 58TH AVE. NORTH  
ST. PETERSBURG FL 33714

Mailing Address

3301 58TH AVE. NORTH  
ST. PETERSBURG FL 33714

FILED  
Mar 04, 1996 08:00 AM  
Secretary of State



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/10/1995		3a. Date of Last Report None	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3306975		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RITCHIE, CHARLOTTE 3301 58TH AVE. NORTH LOT 415 ST. PETERSBURG FL 33714				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				FL	85 Zip Code		

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, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
TITLE	PD	1.1 TITLE	
NAME	TAYLOR, G. DEWEY	1.2 NAME	
STREET ADDRESS	3301 58TH AVE. NORTH, #426	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	BLAKE, G. STEWART	2.2 NAME	
STREET ADDRESS	3301 58TH AVE. NORTH, #126	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	RITCHIE, CHARLOTTE	3.2 NAME	
STREET ADDRESS	3301 58TH AVE. NORTH, #415	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	VALVO, PETRINA	4.2 NAME	
STREET ADDRESS	3301 58TH AVE. NORTH, #318	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	BEASY, ALBERT	5.2 NAME	
STREET ADDRESS	3301 58TH AVE. NORTH, #247	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33714	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

G. DEWEY TAYLOR

2/26/96 (813) 526-4462

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)