

FILE NOW: FILING FEE IS \$61.25

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Apr 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northcutt Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002900 (6)
1. Corporation Name
ALAMAR VILLAGE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business 1224 S.E. FT. KING ST. OCALA FL 34471 US	Mailing Address 1224 S.E. FT. KING ST. OCALA FL 34471 US
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3. Date Incorporated or Qualified 05/24/1996	
4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 1411 NE 22nd Ave Suite, Apt. #, etc. 22 105 City & State 23 Ocala FL Zip 24 34470	2a. Mailing Address 25 same Suite, Apt. #, etc. 26 105 City & State 27 same Zip 28 same Country 29 same	30 same
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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 checked="" 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
DRAKE, ROBERT P.
1224 S.E. FT. KING ST.
OCALA FL 34471

10. Name and Address of New Registered Agent
81 Name: Michael E. Ethridge
82 Street Address (P.O. Box Numbers Not Acceptable): 1411 NE 22nd Avenue
83
84 City: Ocala FL 85 Zip Code: 34470

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]* DATE: 4/21/98

12. OFFICERS AND DIRECTORS		DELETED
TITLE	DP	<input type="checkbox"/>
NAME	DRAKE, ROBERT P.	
STREET ADDRESS	1224 S.E. FT. KING ST.	
CITY-ST-ZIP	OCALA FL	
TITLE	DST	<input type="checkbox"/>
NAME	DEBOLT, MARK	
STREET ADDRESS	1224 S.E. FT. KING ST.	
CITY-ST-ZIP	OCALA FL	
TITLE	D	<input type="checkbox"/>
NAME	ETHRIDGE, MIKE	
STREET ADDRESS	1101 S.E. 56TH COURT	
CITY-ST-ZIP	OCALA FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	DP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	Mike Ethridge		
1.3 STREET ADDRESS	1411 NE 22nd Ave		
1.4 CITY-ST-ZIP	Ocala FL 34470		
2.1 TITLE	DVP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME	Kevin Brooks		
2.3 STREET ADDRESS	767 SE 131st St.		
2.4 CITY-ST-ZIP	Ocala, FL 34480		
3.1 TITLE	D	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.2 NAME	E.W. Davison		
3.3 STREET ADDRESS	1101 SE 10th St.		
3.4 CITY-ST-ZIP	Ocala FL 34471		
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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]* DATE: 3/31/98 352-351-0077

CP2E037 (10/97)