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FILED

Feb 16 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 # N96000004848 (5)

1. Corporation Name

THE RESERVE AT GOLDEN ACRES HOMEOWNERS ASSOCIATI
ON, INC.



Principal Place of Business

Mailing Address

10440 KEY LANTERN DR
NEW PORT RICHEY FL 34654
US

P O BOX 2003
NEW PORT RICHEY FL 34656
US

3. Date Incorporated or Qualified

09/16/1996

4. FEI Number

59-3427305

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

2b Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired

\$6.75 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

10. Name and Address of New Registered Agent

WILLIAMS, DAVID
8930 DECUBELLIS ROAD
NEW PORT RICHEY FL 34654

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

10440 Key Lantern Dr.

84 City

New Port Richey

85 FL

86 Zip Code

34654

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

David Williams

(NOTE: Registered Agent signature required when reinstating)

1/25/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WILLIAMS, DAVID
STREET ADDRESS 8930 DECUBELLIS ROAD
CITY-ST-ZIP NEW PORT RICHEY FL 34654 DELETE

1.1 TITLE VD
1.2 NAME WILLIAMS, DAVID
1.3 STREET ADDRESS 10440 Key Lantern Dr.
1.4 CITY-ST-ZIP New Port Richey, FL 34654 Change Addition

TITLE VD
NAME MITCHELL, D D
STREET ADDRESS 8930 DECUBELLIS ROAD
CITY-ST-ZIP NEW PORT RICHEY FL 34654 DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP Change Addition

TITLE STD
NAME LITTLES, PETER
STREET ADDRESS 8930 DECUBELLIS ROAD
CITY-ST-ZIP NEW PORT RICHEY FL 34654 DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP Change Addition

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:

David Williams

1/28/97

813-861-0778

CR2E037 (10/97)