

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

REGISTRATION
ANNUAL REPORT
1995



NON-RESIDENT CORPORATIONS
REGISTERED OFFICE
IN THE STATE OF FLORIDA

APR 1995

95 MAY -1 AM 8:52

DOCUMENT # **N29963**

(8)

LANCEWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.

SECRETARY
TALLAHASSEE, FLORIDA

13403 WAX MYRTLE TRAIL P.O. BOX 2451 STUART FL 34995		13403 WAX MYRTLE TRAIL P.O. BOX 2451 STUART FL 34995		3. (Date incorporated or applied) 12/29/1988		3a. (Date of Last Report) 05/13/1994	
2. Principal Office (If Applicable) 21. 12600 NW Harbour Ridge Blvd Suite Apt. # 86		2a. Mailing Address 26. 12600 NW Harbour Ridge Blvd Suite Apt. # 86		4. FL Taxpayer ID # 65-0080668		Applied For ☐ Not Applicable	
22. City & State Palm City FL		27. City & State Palm City FL		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip 34990		28. Zip 34990		6. Election to Waive Payment of Franchise Tax ☐		\$5.00 May Be Added to Fees	
24. Country USA		29. Country USA		7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐		\$68.75 Supplemental Fee Not Required	
9. Name and Address of Current Registered Agent SCHULER, JACK C. 13403 WAX MYRTLE TRAIL PALM CITY FL 34990				10. Name and Address of New Registered Agent 81. Name Michael E. Neary 82. Street Address (P.O. Box Number is Not Acceptable) Harbour Ridge 83. 12600 NW Harbour Ridge Blvd 84. City Palm City FL 85. Zip Code 34990			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.							
SIGNATURE: <i>Michael E. Neary</i> MICHAEL E. NEARY GENERAL MANAGER 3/7/95							
12. OFFICERS AND DIRECTORS				13. ADDITIONAL CANDIDATES TO OFFICERS AND DIRECTORS IN 12			
12.1 NAME DR DIP PALMER, JACK 12.2 STREET ADDRESS 1304 LANCEWOOD TERRACE 12.3 CITY, ST, ZIP PALM CITY FL				13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, ST, ZIP			
12.1 NAME DP MORRIS, WALTER F. 12.2 STREET ADDRESS 1409 LANCEWOOD TERRACE 12.3 CITY, ST, ZIP STUART FL				13.1 TITLE ☒ Change ☐ Addition 13.2 NAME D/SIT Wishart, Ronald S. 13.3 STREET ADDRESS 1329 Lancewood Terr 13.4 CITY, ST, ZIP Palm City FL 34990			
12.1 NAME DST D/V P DEBOIS, JAMES A 12.2 STREET ADDRESS 1332 LANCEWOOD TERRACE 12.3 CITY, ST, ZIP PALM CITY FL				13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, ST, ZIP			
12.1 NAME 12.2 STREET ADDRESS 12.3 CITY, ST, ZIP				13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, ST, ZIP			
12.1 NAME 12.2 STREET ADDRESS 12.3 CITY, ST, ZIP				13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, ST, ZIP			
12.1 NAME 12.2 STREET ADDRESS 12.3 CITY, ST, ZIP				13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY, ST, ZIP			
14. I hereby certify that the information supplied with this filing is voluntarily furnished and drawn out promptly for the corporation stated in law (see 1994(2) (b) Florida Statutes). I further certify that the information included on this filing is not a fraudulent or false 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 person or persons empowered to provide this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13. Change or removal of an officer with an address.							
SIGNATURE: <i>John F. Palmer</i>				3/7/95			