

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 # N15694 (5)

1. Corporation Name

GOLDEN PONDS OF FORT PIERCE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

10105 MILL CREEK LANE
FT. PIERCE FL 34945
US

Mailing Address

10105 MILL CREEK LANE
FT. PIERCE FL 34945
US



3. Date Incorporated or Qualified
07/02/1986

3a. Date of Last Report
03/01/1995

2. Principal Place of Business
21 10107 Gas Light Ct.

2a. Mailing Address
26 10107 Gas Light Ct.

4. FEI Number
59-2807559

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Ft. Pierce, FL

28 Ft. Pierce, FL

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

24 34945 25 US

29 34945 30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COPE, HELEN J.
1787 STONYBROOK DR
FT. PIERCE FL 34945

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

Helen J. Cope
Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when re/instating)

2/22/96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETE
NAME MILLER, CALVIN
STREET ADDRESS 1719 WALDEN POND DRIVE
CITY-ST-ZIP FT. PIERCE FL

1.1 TITLE V/D ☒ Change ☐ Addition
1.2 NAME Robert Breen
1.3 STREET ADDRESS 10129 Greatwoods Pond
1.4 CITY-ST-ZIP Ft. Pierce, FL 34945

TITLE VD ☐ DELETE
NAME QUEMERE, LAURENCE
STREET ADDRESS 1704 WALDEN POND DR
CITY-ST-ZIP FT. PIERCE FL

2.1 TITLE V/D ☒ Change ☐ Addition
2.2 NAME Reyburn Campbell
2.3 STREET ADDRESS 1747 Bar Harbor Dr.
2.4 CITY-ST-ZIP Ft. Pierce, FL 34945

TITLE VD ☐ DELETE
NAME LEGREE, SUSAN
STREET ADDRESS 1844 GOLDEN PONDS DR
CITY-ST-ZIP FT. PIERCE FL

3.1 TITLE T/D ☒ Change ☐ Addition
3.2 NAME Marilyn Hagin
3.3 STREET ADDRESS 10111 Mill Creek Lane
3.4 CITY-ST-ZIP Ft. Pierce, FL 34945

TITLE ASD ☐ DELETE
NAME HOLLOWAY, ELEANOR
STREET ADDRESS 10107 GREATWOODS POND
CITY-ST-ZIP FT. PIERCE FL

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

TITLE SD ☐ DELETE
NAME COPE, HELEN
STREET ADDRESS 1787 STONYBROOK DR
CITY-ST-ZIP FT. PIERCE FL

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

TITLE PD ☐ DELETE
NAME WILLIAMS, MORTIMER
STREET ADDRESS 10105 MILL CREEK LANE
CITY-ST-ZIP FT. PIERCE FL

6.1 TITLE P/D ☒ Change ☐ Addition
6.2 NAME John Clark
6.3 STREET ADDRESS 10107 Gas Light Ct.
6.4 CITY-ST-ZIP Ft. Pierce, FL 34945

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/96 (407) 461-4076

Date Daytime Phone #

CR2E037 (12/95)