FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N50065

(4)

ANDOVER LAKES, PHASE 2 HOMEOWNER'S ASSOCIATION. INC.

INC.					
Principal Place of Business		Mailing Address		T I DENILON DELI BANA BENIL OBIRE DINOT DAN BIBLI BIBLI DIRIT DIRIT DIRIT BIBLI	
2269 LEE ROAD SUITE 101 WINTER PARK FL 32789-1866		2269 LEE ROAD SUITE 101 WINTER PARK FL 32789-1866			
				3. Date Incorporated or Qualified 07/27/1992 04/20/1995	
	ace of Business	2a. Mailing Address		4. FEI Number Applied For 59-3159818 Not Applied For	
Suite, Apt,	#, etc.	Suite, Apt. #, etc.		¢0.75	
22		27		5. Certificate of Status Desired Fee Required	
City & State	•	City & State		6. Election Campaign Financing \$5.00 May Be	
Zip	Country	28 Zip	Country	Added to Fees	
24	25	⊢ '	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent	
			81 Name		
MOSELER, JOHN A. 2269 LEE ROAD			Address (P.O. Box Number is Not Acceptable)		
SUITE 1			83		
	PARK FL 32789				
			84 City	FL 85 Zip Code	
11. Pursuant t	o the provisions of Sections 617.050;	2 and 617.1508, Florida Statutes	, the above-named or	corporation submits this statement for the purpose of changing its registered office is board of directors. I hereby accept the appointment as registered agent. I am	
familiar wit	h, and accept the obligations of, Sec	tion 617.0503, Florida Statutes.	by the desposations	s bound or directors. Thereby accept the appointment as registered agent. Fam	
SIGNATURE _	Signature, typed or printed name of registered agen	t and little it applicable /NOTE	: Registered Agent signature	required when renstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	Change Addition	
NAME	MOSELER, JOHN A.		1 2 NAME		
STREET ADDRESS CITY-ST-ZIP	2269 LEE ROAD, #101 WINTER PARK FL		1.3 STREET ADDRESS		
TITLE	VD	DELETE	14 CITY - ST - ZIP 2 1 TITLE	☐ Change ☐ Addition	
NAME	BOSCHMANS, ERIC F J.	_	2 2 NAME		
STREET ADDRESS	2269 LEE RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL	Document	2 4 CITY-ST-ZIP		
TITLE NAME	STD VEDONICA M	DELETE	3.1 TITLE	Change Addition	
STREET ADDRESS	PETRY, VERONICA M. 2269 LEE ROAD, #101		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		3.4. CITY-S1-ZIP		
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TiTLE	Change Addition	
NAME		Docent	5.2 NAME	Criange Reconct	
STREET AODRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME DESCENT ADDRESS			6.2 NAME		
STREET ADDRESS CITY-ST-ZIP			6 3 STREET ADDRESS		
14. I do hereby	y certify that the information supplied	with this filing is voluntarily furnis	640(f) -ST-ZIP hed and does not qua	lalify 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: 36 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					