

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 # N29963 (8)

1. Corporation Name

LANCEWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

12600 NW HARBOUR RIDGE BLVD  
P.O. BOX 2451  
PALM CITY FL 34990  
US

12600 NW HARBOUR RIDGE BLVD  
P.O. BOX 2451  
PALM CITY FL 34990  
US

3. Date Incorporated or Qualified

12/29/1988

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 ~~Delete line 2 (Box #)~~

26 ~~Delete line 2 (Box #)~~

4. FEI Number

65-0080668

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

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

City & State

City & State

23

27

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEARY, MICHAEL E  
12600 NW HARBOUR RIDGE BLVD  
PALM CITY FL 34990

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 officer 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, typed or printed name of registered agent and state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME PALMER, JACK  
STREET ADDRESS 1304 LANCEWOOD TERRACE  
CITY-ST-ZIP PALM CITY FL ☒ DELETE

TITLE DST  
NAME WISHART, RONALD S  
STREET ADDRESS 1329 LANCEWOOD TERR  
CITY-ST-ZIP PALM CITY FL ☐ DELETE

TITLE DVP  
NAME DEBOIS, JAMES A  
STREET ADDRESS 1332 LANCEWOOD TERRACE  
CITY-ST-ZIP PALM CITY FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME GRACZYK, Frederick A.  
1.3 STREET ADDRESS 1328 Lancewood Terrace  
1.4 CITY-ST-ZIP Palm City, FL 34990 ☐ Change ☒ Addition

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

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

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

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

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

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  
JAMES A. DEBOIS

3/12/96

336-3699

Date

Daytime Phone #

CR2E037 (12/95)