

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 # N93000001244 (3)

1. Corporation Name

SOUTHCHASE PARCEL 2 COMMUNITY ASSOCIATION, INC.



Principal Place of Business

Mailing Address

401 W COLONIAL DRIVE
SUITE 7
ORLANDO FL 32804

401 W COLONIAL DRIVE
SUITE 7
ORLANDO FL 32804

3. Date Incorporated or Qualified

03/17/1993

3a. Date of Last Report

03/16/1995

2. Principal Place of Business

2a. Mailing Address

21 12112 Bellsworth Way

26 P.O. Box 770095

4. FEI Number

59-3180915

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

23 Orlando, Florida

28 Orlando, FL

24 32837

25 USA

29 32837-0095

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FANT, JAMES H
401 W COLONIAL DRIVE
SUITE 7
ORLANDO FL 32804

81 Name Roger Horne

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

12112 Bellsworth Way

83

84 City Orlando

FL

85 Zip Code 32837

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

* Roger Horne, ROGER HORNE, PRESIDENT-DIRECTOR

3-30-96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE

NAME FANT, JAMES H
STREET ADDRESS 401 W COLONIAL DRIVE, SUITE 7
CITY-ST-ZIP ORLANDO FL 32804

11 TITLE ☐ Change ☐ Addition

12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE DS ☒ DELETE

NAME LEGG, VERA
STREET ADDRESS 401 W COLONIAL DR., STE 7
CITY-ST-ZIP ORLANDO FL

21 TITLE DVT ☐ Change ☒ Addition

22 NAME ROB JACKSON
23 STREET ADDRESS 12107 BELLSWORTH WAY
24 CITY-ST-ZIP ORLANDO, FL 32837

TITLE DVT ☒ DELETE

NAME CRENSHAW, JAMES
STREET ADDRESS 401 W COLONIAL DRIVE, SUITE 7
CITY-ST-ZIP ORLANDO FL 32804

31 TITLE DS ☐ Change ☒ Addition

32 NAME CHRISTINA BAUS
33 STREET ADDRESS 2229 LAUREL PINE LANE
34 CITY-ST-ZIP ORLANDO, FL 32837

TITLE D ☐ DELETE

NAME Horne, Roger
STREET ADDRESS 12112 Bellsworth Way
CITY-ST-ZIP Orlando, Florida 32837

41 TITLE D ☐ Change ☒ Addition

42 NAME Roger Horne
43 STREET ADDRESS 12112 Bellsworth Way
44 CITY-ST-ZIP Orlando, FL 32837

TITLE DV ☐ DELETE

NAME Kenneth Zant
STREET ADDRESS 2331 Laurel Pine Lane
CITY-ST-ZIP Orlando, FL 32837

51 TITLE DV ☐ Change ☒ Addition

52 NAME Kenneth Zant
53 STREET ADDRESS 2331 Laurel Pine Lane
54 CITY-ST-ZIP Orlando, FL 32837

TITLE DV ☐ DELETE

NAME Steve Burth
STREET ADDRESS 12115 Bellsworth Way
CITY-ST-ZIP Orlando, FL 32837

61 TITLE DV ☐ Change ☒ Addition

62 NAME Steve Burth
63 STREET ADDRESS 12115 Bellsworth Way
64 CITY-ST-ZIP Orlando, FL 32837

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: *

Roger Horne, ROGER HORNE

3-30-96

407-939-7084

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)