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 # **728781** **(6)**

1. Corporation Name

LAKE JESSAMINE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5325 JESSAMINE LANE ORLANDO FL 32839 US	5325 JESSAMINE LANE ORLANDO FL 32839 US

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 02/08/1974
3a. Date of Last Report: 05/19/1995
4. FEI Number: 59-1975072 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WALLACE, ROBERT L.
537 MARY JESS ROAD
ORLANDO FL 32809

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	President	☑ Change ☐ Addition
NAME	NEWTON, NILE		1.2 NAME	DUGGINS, APRIL	
STREET ADDRESS	5168 STATEMEYER DRIVE		1.3 STREET ADDRESS	5325 JESSAMINE LANE	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	ORLANDO FL 32839-2055	
TITLE	D	☐ DELETE	2.1 TITLE	Vice President	☑ Change ☑ Addition
NAME	GASTALDO, EDWARD		2.2 NAME	JOHANN BJORNSON	
STREET ADDRESS	5347 LAKE JESSAMINE DRIVE		2.3 STREET ADDRESS	5208 STATEMEYER DRIVE	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	T	☐ DELETE	3.1 TITLE	Director	☐ Change ☑ Addition
NAME	DUGGINS, APRIL		3.2 NAME	FRANK O'CONNIHAN	
STREET ADDRESS	5325 JESSAINE LANE		3.3 STREET ADDRESS	5144 STATEMEYER DRIVE	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	S	☐ DELETE	4.1 TITLE	Director	☐ Change ☑ Addition
NAME	WYATT, MARTHA		4.2 NAME	DR. NEIL POWELL	
STREET ADDRESS	5335 JESSAMINE LANE		4.3 STREET ADDRESS	5315 JESSAMINE LANE	
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	D	☑ DELETE	5.1 TITLE	Director	☑ Change ☑ Addition
NAME	RADCLIFF, PETE		5.2 NAME	JOSEPH ANELLO	
STREET ADDRESS	5802 SHELBURN CT.		5.3 STREET ADDRESS	5164 STATEMEYER DRIVE	
CITY-ST-ZIP	ORLANDO, FL 00000		5.4 CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	D	☑ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	OLIN, SUSAN		6.2 NAME		
STREET ADDRESS	424 BYWATER DR.		6.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		6.4 CITY-ST-ZIP		

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: APRIL S. DUGGINS 5/18/96 (407) 826-1702
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)