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Apr 29 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # N23091 (4)

1. Corporation Name
COUNTRYSIDE HEIGHTS HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business	Mailing Address
P O BOX 2423 APOPKA FL 32704-9423	P O BOX 2423 APOPKA FL 32704-2423

3. Date Incorporated or Qualified: 10/19/1987
3a. Date of Last Report: 08/29/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 59-2937915 ☐ 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

CHRISTMAS, ROBERT
2102 COUNTRYSIDE DRIVE
APOPKA FL 32712

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 Robert Christmas 4-17-97
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	1.1 TITLE	PRESIDENT	☑ Change ☐ Addition
NAME	LEHNER, CHARLES BUSEN		1.2 NAME	CHRISTMAS, ROBERT	
STREET ADDRESS	1717 WOODBURY CT., S		1.3 STREET ADDRESS	2102 Countryside Drive	
CITY-ST-ZIP	APOPKA FL		1.4 CITY-ST-ZIP	APOPKA, FL 32712	
TITLE	D	☐ DELETE	2.1 TITLE	D	☐ Change ☑ Addition
NAME	GESELL, RICHARD		2.2 NAME	BEALL MARK	
STREET ADDRESS	1786 WOODBURY CT., N		2.3 STREET ADDRESS	1718 Errol Woods Drive	
CITY-ST-ZIP	APOPKA FL		2.4 CITY-ST-ZIP	APOPKA FL 32712	
TITLE	D	☐ DELETE	3.1 TITLE	D	☐ Change ☑ Addition
NAME	STULTZ, JACK		3.2 NAME	JOHN COBURN	
STREET ADDRESS	1757 WOODBURY COURT		3.3 STREET ADDRESS	1764 Nordic Court	
CITY-ST-ZIP	APOPKA FL 32712		3.4 CITY-ST-ZIP	APOPKA FL 32712	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BUSENLEHNER, CHARLES		4.2 NAME		
STREET ADDRESS	1717 WOODBURY CCOURT		4.3 STREET ADDRESS		
CITY-ST-ZIP	APOPKA FL 32712		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	GATELL, DEE		5.2 NAME		
STREET ADDRESS	2107 COUNTRYSIDE DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	APOPKA FL 32712		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SMOLENSKI, MARK		6.2 NAME		
STREET ADDRESS	1752 COLD SPRINGS COURT		6.3 STREET ADDRESS		
CITY-ST-ZIP	APOPKA FL 32712		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Robert Christmas 4-17-97

CR2E037 (9/96)