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May 01 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 # N05138 (5)  
1. Corporation Name  
HOMES AT LAWRENCE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 5904 TIMBER VALLEY DR. LAKE WORTH FL 33463  
Mailing Address: P.O. BOX 6189 LAKE WORTH FL 33466-6189

3. Date Incorporated or Qualified: 09/14/1984  
3a. Date of Last Report: 08/20/1996

2. Principal Place of Business (21-23) and Mailing Address (2a-24) details including Suite, City, State, Zip, and Country.  
4. FEI Number: 65-0035072  
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

9. Name and Address of Current Registered Agent: RAUCH, NORMAN, 3450 S. OCEAN BLVD. STE. #522, PALM BCH. FL 33480  
10. Name and Address of New Registered Agent (81-85): RAUCH, HARRY, 5904 TIMBER VALLEY DR, LAKE WORTH, FL 33463

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: HARRY RAUCH  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  
DATE: 4-23-97

12. OFFICERS AND DIRECTORS		13. PSD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	RAUCH, HARRY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAUCH, NORMAN	1.2 NAME	5904 TIMBER VALLEY DR
STREET ADDRESS	3450 SOUTH OCEAN BLVD. #522	1.3 STREET ADDRESS	LAKE WORTH, FL 33463
CITY-ST-ZIP	PALM BEACH FL 33480	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	
NAME	RAUCH, MELVIN	2.2 NAME	
STREET ADDRESS	5904 TIMBER VALLEY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	WEINBERG, LEONARD	3.2 NAME	
STREET ADDRESS	5904 TIMBER VALLEY DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33463	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: HARRY RAUCH  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
DATE: 4-23-97  
Daytime Phone #: 561 9660419  
0043965

CR2E037 (9/96)