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May 09 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 # N41222 (3)

1. Corporation Name

LAKE JOHIO WATERSIDE HOMEOWNER'S ASSOCIATION, IN
C.



Principal Place of Business Mailing Address
2180 W. SR 434 2180 W. SR 434
SUITE 6000 SUITE 5000
LONGWOOD FL 32779 LONGWOOD FL 32779-5044
US US

3. Date Incorporated or Qualified 11/16/1990 3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

4. FEI Number 59-3117652 Applied For Not Applicable

22 City & State 27 City & State

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 Zip 25 Country 28 Zip 30 Country

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 25 29 30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HART, JR. J W.
SENTRY MANAGEMENT, INC.
2180 W. SR 434, SUITE 5000
LONGWOOD FL 32779

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	PANKEY, VICTOR S.	
STREET ADDRESS	3264 SHEARER CROSSING	
CITY-ST-ZIP	BONSALL CA	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	CHOI, CHARLES Y..	
STREET ADDRESS	626 PENROSE BLVD	
CITY-ST-ZIP	COLORADO SPRINGS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PANKEY, EDGAR E.	
STREET ADDRESS	320 W. MAIN	
CITY-ST-ZIP	TUSTIN, CALF.	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PANKEY, VICTOR	
1.3 STREET ADDRESS	3264 SHEARER CROSSING	
1.4 CITY-ST-ZIP	BONSALLE CA	
2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CHOI, CHARLES	
2.3 STREET ADDRESS	526 PENROSE BLVD	
2.4 CITY-ST-ZIP	COLORADO SPRINGS CO	
3.1 TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	PANKEY, EDGAR	
3.3 STREET ADDRESS	320 WEST MAIN	
3.4 CITY-ST-ZIP	TUSTIN CA	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 changing, or on an attachment with an address.

SIGNATURE: [Signature] 03/16/97 718-475-2550

CP2E037 (9/96)