FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # N9400003523 (7)

ANDOVER LAKES, PHASE 3 HOMEOWNER'S ASSOCIATION, INC.					
Principal Plac	e of Business	Mailing Address		a toditier, Cir (Pior Mari) ditire antie Ad	ikt abiti abibs tildi ölkik linab ilki ibsi
SUITE 101 SUITE 101		2269 LEE ROAD SUITE 101 WINTER PARK FL 32789-721		3. Date Incorporated or Qualified 07/18/1994	3a. Date of Last Report 03/04/1996
2 Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 28		}		59-3285218	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #		Suite, Apt. #, etc.	····	5. Certificate of Status Desired	\$8.75 Additional
22 27 27					Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation has liability for in	
24	25	29	30	Florida Statutes	Yes No
	9. Name and Address of Current	t Registered Agent	A 1 - 1	10. Name and Address of New Reg	alstered Agent
			81 Name		
MOSELER, JOHN A			82 Street Add	fress (P.O. Box Number is Not Acceptable	le)
2269 LEE RD. SUITE 101			83		
	PARK FL 32789-1866				
***************************************	***************************************		84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	2 and 617,1508, Florida Statute	s, the above-named con	rporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing its registered
agent. I a	am familiar with, and accept the obliga	itions of, Section 617.0503, Flo	rida Statutes.	:	t the appointment as registered
SIGNATURE			: Registered Agent signature regi		DATE
12.	Signature typed or printed name of registered ager OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME	MOSELER, JOHN A		1.2 NAME		
STREET ADDRESS	2269 LEE RD., STE. 101		1.3 STREET ADORESS		
CITY-ST-ZIP	WINTER PARK FL 32789-1866	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE NAME	DV BOSCHMANS, ERIC F	□ Dereit	2.1 TITLE 2.2 NAME		CI puside CI vancion
STREET ADDRESS	2269 LEE RD., STE. 101		2.3 STREET ADDRESS		
CITY - ST - ZIP	WINTER PARK FL 32789-1866		2. 4 CITY-ST-ZIP		
TITLE	DST	DELETE	3.1 TITLE		Change Addition
NAME	PETRY, VERONICA M		3.2 NAME		
STREET ADDRESS	2269 LEE RD., STE. 101		3.3 STREET ADDRESS		
DITY-ST-ZiP TiTLE	WINTER PARK FL 32789-1868	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	•	La peccie	4. 2 NAME		freet assessing = 1 sequitors
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		·
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP 6 1 TITLE		Change Addition
TITLE NAME		[1] prerie	6.2 NAME		Ci outube Ci voduon
STREET ADDRESS			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 changed, or on an attachment with an address.

CITY-ST-ZIP

FILED

May 20 1997 8:00am

Secretary of State