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Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **730194** (8)

1. Corporation Name

**CARROLLWOOD VILLAGE NORTHMEADOW CLUSTER HOUSES C
ONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

% GREENACRE PROPERTIES, INC
4131 GUNN HWY
TAMPA FL 33624

% GREENACRE PROPERTIES, INC
4131 GUNN HWY
TAMPA FL 33624

3. Date Incorporated or Qualified

07/12/1974

4. FEI Number

59-1632817

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENACRE PROPERTIES, INC.
4131 GUNN HIGHWAY
TAMPA FL 33624

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	PD	<input checked="" type="checkbox"/> DELETE
NAME	APGAR, CHUCK	
STREET ADDRESS	4184 NORTHMEADOW CR	
CITY-ST-ZIP	TAMPA FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	TERRY, JOSEPH	
STREET ADDRESS	4142 NORTH MEADOW CIR.	
CITY-ST-ZIP	TAMPA FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	BAXLEY, CHARLES	
STREET ADDRESS	4127 NORTHMEADOW CIR	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SAUNDERS, D.J.	
STREET ADDRESS	4175 NORTH MEADOW CIR.	
CITY-ST-ZIP	TAMPA FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	ROSO, MARILYN	
STREET ADDRESS	4167 NORTHMEADOW CR.	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ELGAR, GRAYCE	
STREET ADDRESS	4137 NORTHMEADOW CIRCLE	
CITY-ST-ZIP	TAMPA FL	

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	TERRY, JOSEPH	
1.3 STREET ADDRESS	4142 Northmeadow Circle	
1.4 CITY-ST-ZIP	Tampa, FL 33624	
2.1 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SAUNDERS, D. J.	
2.3 STREET ADDRESS	4175 Northmeadow Circle	
2.4 CITY-ST-ZIP	Tampa, FL 33624	
3.1 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MCLENNAN, RALEIGH	
3.3 STREET ADDRESS	4154 Northmeadow Circle	
3.4 CITY-ST-ZIP	Tampa, FL 33624	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	ROSO, BOB	
4.3 STREET ADDRESS	4167 Northmeadow Circle	
4.4 CITY-ST-ZIP	Tampa, FL 33624	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	WOLTMANN, KATHY	
5.3 STREET ADDRESS	4129 Northmeadow Circle	
5.4 CITY-ST-ZIP	Tampa, FL 33624	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	EICHLER, PATRICIA	
6.3 STREET ADDRESS	4117 Northmeadow Circle	
6.4 CITY-ST-ZIP	Tampa, FL 33624	

14. I 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:

Joseph R Terry

CR2E037 (10/97)