


FILE NOW: FILING FEE IS \$61.25

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Mar 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mertham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N29145** (2)
1. Corporation Name
COUNTRY ADDRESS COMMUNITY ASSOCIATION, INC.



Principal Place of Business 1228 BRIDLEBROOK DR. CASSELBERRY FL 32707 US	Mailing Address P.O. BOX 190476 CASSELBERRY FL 32718-0476 US
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3. Date Incorporated or Qualified 11/04/1988
4. FEI Number 59-2871531
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business 21 980 Montgomery Road Suite, Apt. #, etc. 22 Apt. #3 City & State 23 Altamonte Springs, FL Zip 24 32714	2a. Mailing Address 26 P.O. Box 3355 Suite, Apt. #, etc. 27 City & State 28 Longwood, FL Zip 29 32779	Country 25 Seminole	Country 30 Seminole
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9. Name and Address of Current Registered Agent HUFF, SANDRA M 1228 BRIDLEBROOK DR. CASSELBERRY FL 32707
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10. Name and Address of New Registered Agent 81 Name Meridythe Kanaga 82 Street Address (P.O. Box Number is Not Acceptable) 980 Montgomery Road, #3 83 84 City Altamonte Springs FL 85 Zip Code 32714

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 <i>Meridythe Kanaga</i> Meridythe Kanaga, Agent 2/2/98 <small>Signature typed or printed name of registering agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE</small>

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DENNIS, STEVEN 1978 MARTINA ST APOPKA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GILMORE, LOUIS G. 1942 MARTINA ST APOPKA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, DANIEL 1962 TINDARO DR APOPKA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.
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SIGNATURE: *Stephen Dennis* **Stephen Dennis** **2/2/98** **407/862-2292**

CP2E037 (10/97)