FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT** #

(8)

SOUTHCHASE PARCEL 45 COMMUNITY ASSOCIATION, INC.

Mar 06 1998 8:00am Secretary of State

		BIL BIBS BIBLI BIBLI AJRIL INGL				
Principal Place of Business	pal Place of Business Mailing Address		- I TORUTAL BUT OTETO TORUS BUTTU TORUS UTAT BUTTU BUTTU STORY STORY BUTTU STERY (SER) -			
2180 WEST SR 434 SUITE 5000 LONGWOOD FL 32779-5044	2180 WEST SR 434 SUITE 5000 LONGWOOD FL 32779-5044		3. Date Incorporated or Qualified 03/25/1991			
US	US		4. FEI Number 59-2995812	Applied For		
2. Principal Place of Business 21 C/O Attwood-Phillips, Inc	2a. Malling Address 26C/O Attwood-Phillip	s. Inc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Suite, Apt. #, etc. 22 1350 Orange Avenue	Suite, Apt. #, etc. 27 P.O. BOX 1208		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State 23 Winter Park, FL 32789	City & State 28 Winter Park, FL 3	2790-1208	7. Is this nonprofit corporation a homeowne			
Zip Country 24 32789 25 US	Zip Countr 29 32790-1208 30 US	•	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible Yes 🔀 No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
HART, JAMES W. JR. SENTRY MANAGEMENT INC 2180 WEST SR 434, SUITE 5000		Attwo	ips, Roger V. ss (P.O. Box Number is Not Acceptable) ood-Phillips, Inc. Orange Avenue			
LONGWOOD FL 32779	BA	City	er Park, FL	85 Zip Code 32789		

office or re agent. I as	egistered agent, or both in the State of F m familiar with and ecopy the obligation	lorida. Such change was au s of, Section 617.0503, Flori	thorized by the cor.	poration's board of directors. I hereby acc	ept the appointment as	registered
SIGNATURE =	signatural system of registered agent and	Loger V.	MI///PS	required when reinstating)	<u> </u>	
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	S IN 12
TITLE	SD	DELETE	1.1 TITLE	VD	☐ Change	X Addition
NAME	ZACHARKAN, JANICE		1.2 NAME	Berube, Steve	_	
STREET ADDRESS	11424 KENLEY CIR		1.3 STREET ADDRESS	11570 Kenley Circle		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	Orlando, FL 32824		
TITLE	VD	X DELETE	2.1 TITLE	D	Change	Addition
NAME	SPERO, DONALD		2.2 NAME	Donald Spero		
STREET ADDRESS	11644 ASHRIDGE PLACE		2.3 STREET ADDRESS	11644 Ashridge Place		
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY - ST - ZIP	Orlando, FL 32824		
TITLE	TD	DELETE	3.1 TITLE	<u> </u>	Change	Addition
NAME	THOMPSON, BOB		3.2 NAME			
STREET ADDRESS	11700 KENNINGTON COURT		3.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		3.4. CITY-ST-ZIP			
TITLE	PD	DELETE	4.1 TITLE		☐ Change	☐ AddItion
NAME	FINNEGAN, J.R.		4.2 NAME			
STREET ADDRESS	116 WHITE MARSH CIRCLE		4.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		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			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

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 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 attechment with an address.

2/23/98 487-345-7327