


FILE NOW: FILING FEE IS \$61.25

Certment # 7-056-230 100

FILED

Mar 06 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 # N42672 (8)

1. Corporation Name
SOUTHCHASE PARCEL 45 COMMUNITY ASSOCIATION, INC.

Principal Place of Business 2180 WEST SR 434 SUITE 5000 LONGWOOD FL 32779-5044 US	Mailing Address 2180 WEST SR 434 SUITE 5000 LONGWOOD FL 32779-5044 US
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3. Date Incorporated or Qualified 03/25/1991	
4. FEI Number 59-2995812	Applied For <input type="checkbox"/> Not Applicable
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 checked="" 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 checked="" type="checkbox"/> No	

2. Principal Place of Business 21 C/O Attwood-Phillips, Inc Suite, Apt. #, etc. 22 1350 Orange Avenue City & State 23 Winter Park, FL 32789 Zip 24 32789 Country 25 US	2a. Mailing Address 26 C/O Attwood-Phillips, Inc. Suite, Apt. #, etc. 27 P.O. BOX 1208 City & State 28 Winter Park, FL 32790-1208 Zip 29 32790-1208 Country 30 US
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9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name Phillips, Roger V.
82 Street Address (P.O. Box Number is Not Acceptable) Attwood-Phillips, Inc.
83 1350 Orange Avenue
84 City Winter Park, FL 85 Zip Code 32789

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: *Roger V. Phillips* **Roger V. Phillips** DATE: **2/23/98**

12. OFFICERS AND DIRECTORS

TITLE SD	ZACHARKAN, JANICE	<input type="checkbox"/> DELETE
NAME	11424 KENLEY CIR	
STREET ADDRESS	ORLANDO FL	
CITY-ST-ZIP		
TITLE VD	SPERO, DONALD	<input checked="" type="checkbox"/> DELETE
NAME	11644 ASHRIDGE PLACE	
STREET ADDRESS	ORLANDO FL	
CITY-ST-ZIP		
TITLE TD	THOMPSON, BOB	<input type="checkbox"/> DELETE
NAME	11700 KENNINGTON COURT	
STREET ADDRESS	ORLANDO FL	
CITY-ST-ZIP		
TITLE PD	FINNEGAN, J.R.	<input type="checkbox"/> DELETE
NAME	116 WHITE MARSH CIRCLE	
STREET ADDRESS	ORLANDO FL	
CITY-ST-ZIP		
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 VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Berube, Steve	
1.3 STREET ADDRESS 11570 Kenley Circle	
1.4 CITY-ST-ZIP Orlando, FL 32824	
2.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME Donald Spero	
2.3 STREET ADDRESS 11644 Ashridge Place	
2.4 CITY-ST-ZIP Orlando, FL 32824	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
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 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: *J.R. Finnegan* **J.R. Finnegan** DATE: **2/23/98 487-345-7327**

CR2E037 (1097)