## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

N96000002309 (0)

US 1 AND ST. AUGUSTINE ROAD ASSOCIATION, INC.

**FILED** Mar 25 1998 8:00am Secretary of State

Principal Place		AUGUSTINE III		alling Address				_			
6875 ULMERTO LARGO FL 3464	N RD.	5	68:	6975 ULMERTON RD. LARGO FL 34641				Date Incorporated or Qualified  04/30/1996  FEI Number 39-3443442  APPLIED FOR		plied For	
2. Principal Pl	lace of Busin	ness	2a. 26	2a. Mailing Address				5.	APPLIED FOR  Certificate of Status Desired	\$8.75 / Fee Re	Additional
Suite, Apt.	#, etc.	<del> </del>	27	Suite, Apt. #, etc.				6.	Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	May Be
City & State	ə			City & State				7. Is this nonprofit corporation a homeowners association?			
Zip		Country 25	29	Zip Cour		Country		This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.  Yes No No			
	9. Name	and Address of C		tered Agent	1001	Т.		10.	Name and Address of New Registered	Agent	
						81	Name				
ALLEN, LEROY 6875 ULMERTON RD.						82	Street Add	dress (f	P.O. Box Number is Not Acceptable)		
LARGO FL 34641						63					
						84	City		FL	<b>85</b> Zip	Code
11. Pursuant office or r agent. I a SIGNATURE							-named col the corpora i.		on submits this statement for the purpose of board of directors. I hereby accept the app	changing it ointment as	ts registered registered
	Signature, typed	or printed name of registe	S AND DIRE			3.	nt algnatura requ	Ulled Wild	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	IS IN 12
12.	PD	OFFICER	2 AND DIRE	DELETE		.1 TITLE	Т		ADDITIONS OF INTEREST OF THE PARTY	Change	Addition
TITLE		DELLA IALAGO				.2 NAME					
NAME		BELLA, JAMES LMERTON RD.					ADDRESS				
STREET ADDRESS		FL 34641									
CITY-ST-ZIP TITLE	VD	FL 34041		DELETE		<u>.4 City-s</u> .1 Title	1-2IP			Change	Addition
		, PATRICK				2 NAME				_ •	
NAME STREET ADDRESS		LMERTON RD.					ADDRESS				
		FL 34641				. 4 CITY-!					
TITLE	STD	1 5 01011		☐ DELETE		1 TITLE	<u> </u>			Change	Addition
NAME		LEROY			3	2 NAME			•		
STREET ADDRESS	COMPANY AND ADDRESS OF THE PARK AND ADDRESS OF THE PAR			3.2		.3 STREET	ADDRESS				
CITY-ST-ZIP		FL 34641			3	4. CITY-	ST-ZIP				
TITLE				DELETE	4	11 TITLE			***	☐ Change	Addition
NAME					- 14	. 2 NAME					
STREET ADDRESS					- 14	1.3 STREET	ADDRESS				
CITY-ST-ZIP						4 CITY-5	ST-ZIP				4.100
TITLE				DELETE		i.1 TITLE				∐ Change	Addition
NAME					5	.2 NAME					
STREET ADDRESS					5	3.3 STREET	ADDRESS				
CITY - ST - ZIP						5.4 CITY - S	ST-ZIP			Char	Addition
TITLE				☐ DELETE		3.1 TITLE	}			☐ Change	Addition
NAME					1	3.2 NAME					
STREET ADDRESS							ADDRESS				
L OUTS OF THE	1					A CITY_	CT. 7IP				

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:

allen LEROVALLOW

813)531-2897