

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90155 032 ****61.25

DOCUMENT # 761421

1. Corporation Name

SOUTH LAKE HOLDEN HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

4102 BRANDEIS AVE
ORLANDO FL 32839
US

Mailing Address

PO BOX 561640
ORLANDO FL 32856-1640
US

389657 - 90155 - 32



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

01/12/1982

4. FEI Number

59-2342165

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEITER, DALE L
4102 BRANDEIS AVE
ORLANDO FL 32839

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 ☐ DELETE

NAME KEITER, DALE KEITER

STREET ADDRESS 4102 BRANDEIS AVE
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME NADER, GEORGE

STREET ADDRESS 425 MACARTHUR DR
CITY-ST-ZIP ORLANDO FL

TITLE ☒ DELETE

NAME TORRES, SILVIA

STREET ADDRESS 4530 BRANDEIS AVE
CITY-ST-ZIP ORLANDO FL

TITLE ☒ DELETE

NAME RABE, JOYCE

STREET ADDRESS 3914 BRANDEIS AVE
CITY-ST-ZIP ORLANDO FL

TITLE ☒ DELETE

NAME HETRICK, KENNETH

STREET ADDRESS 221 KRUEGER ST
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VD ☒ Change ☐ Addition

RABE, JOYCE

3914 BRANDEIS AVE

ORLANDO, FL 32839

SD ☒ Change ☐ Addition

STONE, MARY ANN

409 DOOLITTLE ST

ORLANDO, FL 32839

PD ☒ Change ☐ Addition

YOUNG, EDWARD

4402 BRANDEIS AVE

ORLANDO, FL 32839

☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99

Date

(407) 438-4179

Daytime Phone #

CR05037 (11/98)