FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **703187** **(5)**

1. Corporation Name

ENGLISH ESTATES ENGLISH WOODS HOMEOWNERS ASSOC., INC.

Principal Place of Business	Mailing Address
1271 WINSTON RD. P.O. BOX 300129 MAITLAND FL 32751 US	2060 HUNTERFIELD RD. MAITLAND, FL 32751 P.O. BOX 300129 FERN PARK FL 32730

3. Date Incorporated or Qualified: **11/15/1961**
3a. Date of Last Report: **04/29/1994**
4. FEI Number: **59-2520063** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

21	2. Principal Place of Business	26	2a. Mailing Address: 1900 Derbyshire Road
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc: P.O. Box 300129
23	City & State	28	City & State: Maitland, FL
24	Zip / 25 Country	29	Zip: 32751 / 30 Country: US

9. Name and Address of Current Registered Agent

FREEMAN, THOMAS G.
1009 HWY 436 (P.O. BOX 70)
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent

81 Name: Robert L. Burkhart
82 Street Address (P.O. Box Number is Not Acceptable): 1900 Derbyshire Road
83 P.O. Box 300129
84 City: Maitland **FL** 85 Zip Code: 32751

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Robert L. Burkhart — Robert L. Burkhart — 4/27/95
(Typed or printed name of registered agent and, if agent is a corporation, the name and title of the officer.) (If agent is a corporation, signature of officer required.) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	11 TITLE	TD ☐ Change ☐ Addition
NAME	KLANN, JOHN	12 NAME	Klann, John
STREET ADDRESS	1271 WINSTON ROAD	13 STREET ADDRESS	1271 Winston Road
CITY ST ZIP	MAITLAND FL	14 CITY ST ZIP	Maitland, FL 32751
TITLE	VD	21 TITLE	VD ☐ Change ☐ Addition
NAME	BURKHART, JOHN	22 NAME	Bessmer, Stan
STREET ADDRESS	1420 WINSTON ROAD	23 STREET ADDRESS	1302 Glastonberry Road
CITY ST ZIP	MAITLAND, FL 00000	24 CITY ST ZIP	Maitland, FL 32751
TITLE	D	31 TITLE	D ☐ Change ☐ Addition
NAME	YATES, NANCY	32 NAME	Yates, Nancy
STREET ADDRESS	218 DOVENWOOD RD.	33 STREET ADDRESS	218 Doverwood Road
CITY ST ZIP	FENN PARK FL	34 CITY ST ZIP	Fern Park, FL 32730
TITLE	D	41 TITLE	D ☐ Change ☐ Addition
NAME	WEINBERGER, JANIE	42 NAME	Terechenok, Hank
STREET ADDRESS	2348 FALMOUTH ROAD	43 STREET ADDRESS	2160 Hunterfield Road
CITY ST ZIP	MAITLAND, FL 00000	44 CITY ST ZIP	Maitland, FL 32751
TITLE	SD	51 TITLE	SD ☐ Change ☐ Addition
NAME	SIMMONS, MARGE	52 NAME	Simmons, Marge
STREET ADDRESS	221 DOVERWOOD	53 STREET ADDRESS	221 Doverwood Road
CITY ST ZIP	MAITLAND FL	54 CITY ST ZIP	Fern Park, FL 32730
TITLE	PD	61 TITLE	PD ☐ Change ☐ Addition
NAME	BURKHART, ROBERT	62 NAME	Burkhart, Robert
STREET ADDRESS	1900 DERBYSHIRE RD	63 STREET ADDRESS	1900 Derbyshire Road
CITY ST ZIP	MAITLAND FL	64 CITY ST ZIP	Maitland, FL 32751

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: John A. Klann — John A. Klann — **4-27-95** (Date) — **407-774-7181** (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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