

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
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90077 039 ****61.25

DOCUMENT # 703187 ✓

1. Corporation Name

ENGLISH ESTATES/ENGLISH Woods Assn, Inc

Principal Place of Business

Mailing Address

PO BOX 0129
FERN PARK, FL
32730-0129

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2520063

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

Nancy T Yates
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

NANCY T YATES Treasurer 4/4/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME President
STREET ADDRESS Kelly Constantino
CITY-ST-ZIP 1301 STRATFORD RD
MAITLAND FL 32751

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME membership
1.3 STREET ADDRESS ANN Blakey
1.4 CITY-ST-ZIP 2350 Worthington Rd
MAITLAND FL 32751

TITLE ☐ DELETE
NAME Vice President
STREET ADDRESS Steve O'Donnell
CITY-ST-ZIP 1254 STRATFORD RD
MAITLAND FL 32751

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME Advertising
2.3 STREET ADDRESS Peter Boivin
2.4 CITY-ST-ZIP 2319 Castlewood Rd
MAITLAND FL 32751

TITLE ☐ DELETE
NAME Secretary
STREET ADDRESS Sheri Fanelli
CITY-ST-ZIP 2468 MARKINGHAM RD
MAITLAND FL 32751

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME Legislative
3.3 STREET ADDRESS Scott Fanelli
3.4 CITY-ST-ZIP 2468 MARKINGHAM RD
MAITLAND FL 32751

TITLE ☐ DELETE
NAME Treasurer
STREET ADDRESS Nancy T Yates
CITY-ST-ZIP 218 Doverwood Rd
FERN PARK FL 32730

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME Asst. Editor
4.3 STREET ADDRESS VIRGINIA Doherty
4.4 CITY-ST-ZIP 225 Doverwood Rd
FERN PARK FL 32730

TITLE ☐ DELETE
NAME Editor
STREET ADDRESS Rebecca O'Donnell
CITY-ST-ZIP 1254 STRATFORD RD
MAITLAND FL 32751

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME Beautification
5.3 STREET ADDRESS Phil Dodds
5.4 CITY-ST-ZIP 2025 Sunderland Rd
MAITLAND FL 32751

TITLE ☐ DELETE
NAME Social
STREET ADDRESS Lysa Dodds
CITY-ST-ZIP 2025 Sunderland Rd
MAITLAND FL 32751

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME Yard of the Month
6.3 STREET ADDRESS Brent Albertson
6.4 CITY-ST-ZIP 2478 Castlewood Rd
MAITLAND FL 32751

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NANCY T YATES

Date

Daytime Phone #

4/4/99

407-331-4845

CR2E037 (11/98)