FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 02 1998 8:00am Secretary of State

1. Corporation Name (4)							
GREATER LAKE WALES CIVIC BETTERMENT ASSOCIATION.							
INC.					1 10011 10011 1000 1001 10010 11010 11010 11010 11010		(1011 171 01 102)
Principal Place of Business Mailing Address							11811 01011 1881
1408 S. HIGHLAND PARK DRIVE 1408 S. HIGHLAND PARK DR					3. Date Incorporated or Qualified		
LAKE WALES FL 33853 LAKE WALES FL 33853					12/29/1965		
					4. FEI Number	1-1-2-	pplied For
Principal Place of Business 2a. Mailing Address					23-7145002		ot Applicable
2. Principal Place of Business 2a. Mailing Addr 21 26					5. Certificate of Status Desired		Additional equired
Suite, Apt. #, etc. Suite, Apt. #, etc.					6. Election Campaigh Financing	\$5.00	
22 27					Trust Fund Contribution	Added to	
City & State City & State					7. is this nonprofit corporation a homeowners association?		
Zip	28 Country Zip			Country 8. This corporation owes or has paid the curre			ibio
24			30				No langicie
	9. Name and Address of Current Registered Agent		100	10. Name and Address of New Registered			
			81	Name			
DILLIN,JOHN W				Street Addr	ess (P.O. Box Number is Not Acceptable)		
1408 S. HIGHLAND PARK DRIVE						<u> </u>	
LAKE WALES FL 33853			83		1		
			84	City	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 617 050	2 and 617 1508. Florida Statu	tes the above	named corp	oration submits this statement for the purpose of	nf changing it	ts registered
office or I	registered agent, or both, in the State	of Florida, Such change was	authorized by	the corporati	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE	in resime with and accept the cong	anons of, decison of 1.0000, 11	onda olaloica.				1
SIGNATURE	Signature, typed or printed name of registered age		TE: Augistered Agen	t signature require			
12.	OFFICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	P	
TITLE	DILLIN TORN W				:	L Change	Addition
NAME STREET ADDRESS	Dillin, John W 1408 S Highland PK DR		1.2 NAME	DDDECC.			
CITY-ST-ZIP	LAKE WALES FL		1.3 STREET A		1		1
TITLE	PD	DELETE	2.1 TITLE	- 216		Change	Addition
NAME	FRIEDLANDER, EDWIN M		2.2 NAME				
STREET ADDRESS	A A A A A A A A A A A A A A A A A A A		2.3 STREET A	DDRESS	-		ļ
CITY-ST-ZiP			2. 4 CITY-ST	-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE	VTD	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME	WILLIAMS, JAMES C		3.2 NAME				İ
STREET ADDRESS	1408 S HIGHLAND PK DR		3.3 STREET A	l l			
CITY-ST-ZIP TITLE	LAKE WALES FL	DELETE	3.4. C(TY-ST 4.1 TITLE	-ZIP		Change	Addition
NAME		OLLLIE	4.1 111LC 4.2 NAME				
STREET ADDRESS			4.2 NAME 4.3 STREET A	DOBESS			
GITY-ST-ZIP			4.4 CITY-ST-		i		
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME		·		
STREET ADDRESS			5.3 STREET A	DDRESS	1		ļ
City-ST-ZiP			5.4 CITY-ST-	ZIP			
TITLE	DELETE 6.		6.1 TITLE		1		Addition
NAME			6.2 NAME	Ì	:		1
STREET ADDRESS			6.3 STREET A	i	,		
CITY-ST-ZIP	pertify that the information sympled w	ith this filing does not qualify f	6.4 CITY-ST-		Section 119.07(3)(i), Florida Statutes, I further of	artifu that the	information

Indicated on this annual report or supplied with this fainty does not quality for the exemploi stated in Section 119.07(3)(f), Florida statutes. 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 appearance with an address.