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FILED

Feb 13 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 717609 (2)

1. Corporation Name

COUNTRY CLUB ESTATE CIVIC ASSOCIATION, INC.

Principal Place of Business

12707 COLLEGE HILL DRIVE  
HUDSON FL 34667-1821  
US

Mailing Address

12707 COLLEGE HILL DRIVE  
HUDSON FL 34667-1821  
US

2. Principal Place of Business

21 12707 COLLEGE HILL DRIVE 25 12707 COLLEGE HILL DR.

XXXXXX

22 HUDSON, FLORIDA

23 34667-1821

PASCO

24 34667-1821

25

2a. Mailing Address

25 12707 COLLEGE HILL DR.

Suite, Apt. #, etc.

27 HUDSON, FLORIDA

28 34667-1821

29 34667-1821

30 PASCO

3. Date Incorporated or Qualified  
11/24/19693a. Date of Last Report  
02/09/1996

4. FEI Number

59-2929197

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DICKESON, ROBERT  
7405 PRINCETON DRIVE  
HUDSON FL 34667

HOWARD THOMPSON

7408 PRINCETON DRIVE  
HUDSON FLORIDA 34667

81 Name

HOWARD THOMPSON

82 Street Address (P.O. Box Number is Not Acceptable)

7408 PRINCETON DRIVE

83

84 City

HUDSON,

FL

85 Zip Code  
34667

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME BLASKOWSKI, EUGENE  
STREET ADDRESS 7212 UNIVERSITY DRIVE  
CITY-ST-ZIP HUDSON FLTITLE D ☐ DELETE  
NAME GALLUCCI, PAUL  
STREET ADDRESS 7313 COUNTRY CLUB DRIVE  
CITY-ST-ZIP HUDSON FLTITLE S ☐ DELETE  
NAME GITT, JEAN  
STREET ADDRESS 12813 VASSAR CT.  
CITY-ST-ZIP HUDSON FLTITLE D ☐ DELETE  
NAME ACKERMAN, HARRY  
STREET ADDRESS 7215 PRINCETON DR  
CITY-ST-ZIP HUDSON FLTITLE D ☒ DELETE  
NAME COLTHORP, JAMES  
STREET ADDRESS 12607 COLLEGE HILL DR  
CITY-ST-ZIP HUDSON FLTITLE P ☒ DELETE  
NAME DICKESON, ROBERT  
STREET ADDRESS 7405 PRINCETON DRIVE  
CITY-ST-ZIP HUDSON FL1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME BEVERLY SERIO  
1.3 STREET ADDRESS 12904 SPRING AVE.  
1.4 CITY-ST-ZIP HUDSON, FLORIDA 346672.1 TITLE VP. ☐ Change ☒ Addition  
2.2 NAME LOUISE COURTNEY  
2.3 STREET ADDRESS 12612 CAPITAL DRIVE  
2.4 CITY-ST-ZIP HUDSON, FLORIDA 346673.1 TITLE P. ☐ Change ☒ Addition  
3.2 NAME HOWARD THOMPSON  
3.3 STREET ADDRESS 7408 PRINCETON DRIVE  
3.4 CITY-ST-ZIP HUDSON, FLORIDA 346674.1 TITLE T. ☐ Change ☒ Addition  
4.2 NAME MARY COBB  
4.3 STREET ADDRESS 12814 SPRING AVE.  
4.4 CITY-ST-ZIP HUDSON, FLORIDA 346675.1 TITLE JAY BARKSDALE ☐ Change ☒ Addition  
5.2 NAME 12714 COLLEGE HILL DRIVE  
5.3 STREET ADDRESS HUDSON, FLORIDA 34667  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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: Howard Thompson HOWARD THOMPSON PRESIDENT

2-12-97

(813)

868 559

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 0089212

CR2E037 (9/96)