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Feb 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 725078 (0)

1. Corporation Name

CARROLLWOOD VILLAGE FAIRWAY TOWNHOUSES CONDOMINIUMS ASSOCIATION, INC



Principal Place of Business

Mailing Address

4131 GUNN HIGHWAY
TAMPA FL 33624

4131 GUNN HIGHWAY
TAMPA FL 33624-4725

3. Date Incorporated or Qualified
12/21/1972

3a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-1456773

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

8. 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

GREENACRE PROPERTIES, INC.
4131 GUNN HIGHWAY
TAMPA FL 33624

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD DELETE
NAME RING, KARL
STREET ADDRESS 4206 FAIRWAY CIRCLE
CITY-ST-ZIP TAMPA, FL 00000

1.1 TITLE D Change Addition
1.2 NAME ROSS BROWN
1.3 STREET ADDRESS 4215 Fairway Circle
1.4 CITY-ST-ZIP Tampa, FL 33624

TITLE D DELETE
NAME WHIDDEN, SHERYL
STREET ADDRESS 4221 FAIRWAY CIRCLE
CITY-ST-ZIP TAMPA FL

2.1 TITLE SD Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D DELETE
NAME CORYELL, DON
STREET ADDRESS 4218 FAIRWAY RUN
CITY-ST-ZIP TAMPA FL

3.1 TITLE VD Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PD DELETE
NAME BARDIN, JIM
STREET ADDRESS 4226 FAIRWAY CIRCLE
CITY-ST-ZIP TAMPA FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VD DELETE
NAME MOCK, ROGER
STREET ADDRESS 4213 FAIRWAY RUN
CITY-ST-ZIP TAMPA FL

5.1 TITLE TD Change Addition
5.2 NAME BETH COPENHAVER
5.3 STREET ADDRESS 4203 Fairway Circle
5.4 CITY-ST-ZIP Tampa, FL 33624

TITLE D DELETE
NAME JUSTO, SHIRLEY
STREET ADDRESS 4223 FAIRWAY CIRCLE
CITY-ST-ZIP TAMPA FL

6.1 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: *[Signature]* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)