

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Mar 26 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 726095 (3)**  
 1. Corporation Name  
**SWEETWATER CLUB HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business <b>2180 W SR 434 #5000 LONGWOOD FL 32779-5024</b>	Mailing Address <b>2180 W SR 434 #5000 LONGWOOD FL 32779-5024</b>
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3. Date Incorporated or Qualified <b>04/12/1973</b>
4. FEI Number <b>59-2267208</b>
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	2b. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
25. Country	29. Country

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HART, JAMES W JR  
SENTRY MANAGEMENT INC.  
2180 WEST SR 434, SUITE 5000  
LONGWOOD FL 32779-5044**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number Is Not Acceptable)
83.
84. City
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D FERGUSON, JAMES 1180 SWEETWATER CLUB BOULEVARD LONGWOOD FL	1.1 TITLE	SD HAMMAN, CAREEN 102 AMBERWOOD DR LONGWOOD FL 32779
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D MIZWICKI, ALANA 510 SWEETWATER CLUB CIRCLE LONGWOOD FL	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	TD PRIORE, LUCIANO 505 SWEETWATER CLUB CIRCLE LONGWOOD FL	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	PD LABENSKY, LARRY 950 SWEETWATER CLUB BOULEVARD LONGWOOD FL	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D ROSE, JON 303 MAGNOLIA LAKE DRIVE LONGWOOD FL	5.1 TITLE	D FINNELL, BILL 1060 SWEETWATER CLUB BLVD LONGWOOD FL 32779
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	VD COOK, STEVE 804 CLUB CIR E LONGWOOD FL	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption provided 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, trustee, emp... 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: \_\_\_\_\_ DATE: **3/26/98**

CR2E037 (10/97)

SWEETWATER CLUB HOMEOWNERS ASSOCIATION INC.  
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
CONTINUED

13.	7.1	TITLE:	D	(ADDITION)
	7.2	NAME:	GASPERONI SR, EMIL	
	7.3	STREET ADDRESS:	1126 BROWNSHIRE CT	
	7.4	CITY-ST-ZIP	LONGWOOD FL 32779	