FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

728530

(7)

COACHMAN LAKES ESTATES ASSOCIATION, INC.

	TMAN LANES ESTATES AS								
Principal Place	of Business	Mailing Address					1811 81811 81811 W		71 8 11 415 () 1441
2341 CAMPBELL RD. CLEARWATER FL 34625 US		2341 CAMPBELL RD. CLEARWATER FL 34825-1504 US							
03		00				3. Date Incorporated or Qualified 12/31/1973	3a. Date of 03,	f Last R /28/19	
2. Principal Place of Business 21		2a. Mailing Address 26.			4. FEI Number 59-3177081	Applied For Not Applicable			
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country 25		7 ip Country 29 30		itry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 🔀 No			
	9. Name and Address of Curren		1		-	10. Name and Address of New Reg			
			E	B1	Name				
RIEGEL,	JAY Ampbell Rd.		82 Street Add		Street Addre	ess (P.O. Box Number is Not Acceptab	e)		
CLEARWATER FL 34625			[8	B 3				h-1	
			[84	City		FL 8	Zip (Code
office or re agent. I ai SIGNATURE.	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida Such change was ations of, Section 617.0503, Fl	authorized orida Statu	by ites.	the corporation.	oration submits this statement for the p on's board of directors. I hereby accep	t the appointr	nging it nent as	s registered registered
12.	Signature, typind or priotico name of registered age OFFICERS ANI		TE: Registered	Agen	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	20100	2C IN 12
TILE	PD	DELETE	1.1 1111	E		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	MCCANN, DAN	 ====: ,	1.2 NAME 1.3 STREET						
STREET ADDRESS	1872 MCCAULEY				ADDRESS				
City-St-ZiP	CLEARWATER FL 34625		1.4 CITY - S		1 - Z IP				
111LE	V	☐ DELETE	21 TITU				Ц	Change	. L. Addition
NAME		DEAL, PAULINE		2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	2300 CAMPBELL RD CLEARWATER FL 34625		2.3 STR 2. 4 CIT		1				
TITLE	S	☐ DELETE	3.1 TITL		1-211			Change	Addition
NAME	SKIBICKI, CHRISTOPHER		3.2 NAM	ME					
STREET ADDRESS	2327 CAMPBELL ROAD		3.3 STA	HEET /	ADDRESS				
CHY-S1-ZiF	CLEARWATER FL 34625		3 4. CIT		Y-ZIP			0.	
TOLE	T NEOFI MV	☐ DELETE	4.1 TITLE				Ц	Change	Addition
NAME STREET ADDRESS	RIEGEL, JAY 2341 CAMPBELL ROAD		4 2 NA		ADDRESS				
CITY ST-20	CLEARWATER FL 34625		4.4 CIT		1				
TILE	D	DELETE		5.1 TITLE				Change	Addition
NAME	BAKER, SCOTT		5.2 NAME		1				
STREET ADDRESS	1825 JESSICA ROAD		5.3 STREET		ADDRESS				
CITY-ST-ZIP	CLEARWATER FL 34625		5.4 CITY		1- ZIP				
TITLE		☐ DETELE	6.1 TITLE				니	Change	Addition
NAME SALSET ADSAUGH			6.2 NAM		ASSESSED				
STREET ADDRESS					ADDRESS				
CITY-S1-ZIP	Lov certify that the information supplied	d with this filing does not goal	6.4 CIT	_		I in Section 119.07(3)(i), Florida Statute	s. I further cer	tify that	the
informatio	m indicated on this annual report or s	upplemental annual report is	true and ac	ccui	rate and that	my signature shall have the same lega t as required by Chapter 617, Florida S	l effect as if m	าade un	der oath; that

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/57

813 - 786 - 830 Davime Phone # 0007784

FILED

Mar 20 1997 8:00am

Secretary of State