FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # 728717 (0)

1. Corporation Name

CRENSHAW LAKE IMPROVEMENT ASSOCIATION, INC.

Principal Place of Business
3624 CRENSHAW LAKE ROAD
LUTZ FL 33549

Mailing Address
3624 CRENSHAW LAKE ROAD
LUTZ FL 33549

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified: 02/05/1974
3a. Date of Last Report: 01/23/1995
4. FEI Number: 59-2760528 ☐ 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

HEYCK, JOSEPH G., JR.
1240 BARNETT PLAZA
101 E. KENNEDY BLVD.
TAMPA FL 33602

10. Name and Address of New Registered Agent

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

TITLE	D	☐ DELETE
NAME	ATCHISON, CAROL	
STREET ADDRESS	1804 VAN DYKE RD	
CITY-ST-ZIP	LUTZ FL	
TITLE	STD	☐ DELETE
NAME	SHELL, HENRY	
STREET ADDRESS	1309 N FLORIDA AVENUE	
CITY-ST-ZIP	TAMPA, FL 00000	
TITLE	PD	☒ DELETE
NAME	CHESTER, WILLIAM M	
STREET ADDRESS	LITTLE ROAD 3627	
CITY-ST-ZIP	LUTZ, FL 00000	
TITLE	D	☐ DELETE
NAME	HOLMES, MARY	
STREET ADDRESS	CRENSHAW LAKE RD., 3612	
CITY-ST-ZIP	LUTZ, FL 00000	
TITLE	VD	☐ DELETE
NAME	HEYCK, JOSEPH G	
STREET ADDRESS	CRENSHAW LAKE ROAD 3624	
CITY-ST-ZIP	LUTZ, FL 00000	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	VD	☒ Change ☒ Addition
4.2 NAME	HOLMES, MARY	
4.3 STREET ADDRESS	CRENSHAW LAKE RD. 3612	
4.4 CITY-ST-ZIP	LUTZ, FL 33549	
5.1 TITLE	PD	☒ Change ☐ Addition
5.2 NAME	HEYCK, JOSEPH G.	
5.3 STREET ADDRESS	CRENSHAW LAKE ROAD 3624	
5.4 CITY-ST-ZIP	LUTZ, FL. 33549	
6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	HEYCK, MARILYN G.	
6.3 STREET ADDRESS	CRENSHAW LAKE RD. 3624	
6.4 CITY-ST-ZIP	LUTZ, FL 33549	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Joseph G. Heyck Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/17/96
Daytime Phone #: (813)223-5351

CR2E037 (12/95)