FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

730783

(8)

SOUTH CRYSTAL LAKE IMPROVEMENT ASSOCIATION, INC.

SUITH CHTSTAL LARE INFRIOVENIENT AGGODIATION, INC.														
Principal Place of Business Mailing Address													• •.•.	
218 CRYSTAL LAKE RD. LUTZ FL 33549					YSTAL RD. L 33549									
L	I\$			US				09/25/1974 05		of Last Report 5/01/1995				
2. 21	Principal Pla	incipal Place of Business			2a. Mailing Address 26				4. FEI Number 59-18937	59-1893794			oplied For ot Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Sta	itus Desired			Additional equired		
23	City & State			City & State				6. Election Campai Trust Fund Conf	ribution		Added	May Be to Fees		
24	Zip	p Country		Zip 29	├──		ountry		Florida Statutes					
		9. Name	and Address of Curre	nt Registered	Agent				10. Name and Add	iress of New R	egistered A	lgent		
								Name						
BOUVIER, BRUCE 718 CRYSTAL LAKE RD.							82	Street	Street Address (P.O. Box Number is Not Acceptable)					
		STAL LAK					83							
	LUTZ FL	33549					84	City			FL		Code	
 Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the ab or registered agent, or both, in the State of Florida. Such change was authorized by the 								named co oration's	rporation submits this state board of directors. I hereby	ment for the pur accept the appo	pose of cha pintment as	nging its re registered a	gistered office agent. I am	
s	familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								equired when reinstaing		DATE			
L.		Signature, typed		nt and title if applicati ND DIRECTORS		13		II SIGIIMI JI A I	ADDITIONS/CH	ANGES 10 OFF		DIRECTOR	RS IN 12	
-	2. ILE	P	OFFICENS A	D DITLOTOTI	DELETE		TLE					Change	Addition	
1		ROI IVIE	R, BRUCE			121	IAME						ļ	
1	AME		YSTAL LAKE RD					ADDRESS						
1	REET ADDRESS	LUTZ F					CITY - S							
	TY-ST-ZIP TLE	n			DELETE		TITLE	71 <u>L</u>	1/P	00 1)	Change	Addition	
1	AMÉ	DELAN	FY.A.E.			22	NAME		JOHN 1 121 CE Lute Fi	ne Col	PMAG	*		
1	REET ADDRESS		3OX 1600			2.3	STREET	T ADDRESS	15/ 0	45tal 1	AKE	Rd.,		
1		LUTZ F				2.4	CITY-:	\$1-ZIP	Lute Ti	J. 335	49			
\vdash	TLF	TD			DELETE		TITLE		/			Change	☐ Addition	
1	AME		.D, ANN			32	NAME							
1	TREET ADDRESS	17915	PEPPERTREE LANE			3.3	STREET	T ADDRESS						
1	ITY-ST-ZIP	LUTZ F	L			3.4.	CITY-	ST-7IP						
	ILE	D			DELETE	41	TITLE	-	5.D.		,	Change	Addition	
1	AME		S, JACKIE			4 2	NAME		1					
s	TREET ADDRESS	17901	PEPPERTREE LANE			4.3	STREE	T ADDRESS						
1	ITY-ST-ZIP	LUTZ F	L			4.4	CITY-	ST - ZIP				C 0	- Addition	
T	ITLE	D			DELETE		TITLE					Change	☐ Addition	
N	AME		EY, LANCE				NAME							
s	TREET ADDRESS		PEPPERTREE LANE					T ADDRESS						
C	ITY - ST - ZIP		FL 00000		Con see			S1-ZIP				Change	Addition	
T	ITLE	D	DANIA		DELETE		TITLE					Change		
١	IAME		(IE, DONALD			1	NAME							
5	STREET ADDRESS		RYSTAL LK RD.					T ADDRESS						
lα	CITY-ST-ZIP	LUTZ F	·L			6.4	CITY-	ST - ZiP	<u></u>				. 17 . 45	

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: