

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

05 MAY -1 PM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 731888 (4)

1. Corporation Name

RANCHWOOD ESTATES HOMEOWNERS ASSOC. INC

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/18/1975 3a. Date of Last Report 06/29/1994

4. FEI Number 59-2371630 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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes ☐ Yes ☐ No

Principal Place of Business Mailing Address
1215 OVERCASH DR. 1215 OVERCASH DR.
1230 RANCHWOOD DRIVE 1230 RANCHWOOD DRIVE
DUNEDIN FL 34698 DUNEDIN FL 34698
US US

2. Principal Place of Business 2a. Mailing Address
21 1198 Ranchwood Dr E 26 1319 Overcash Dr
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 City & State 27 City & State
23 Dunedin, FL 28 Dunedin, FL

24 Zip 25 Country 29 Zip 30 Country
24 34698 25 U.S. 29 34698 30 U.S.

9. Name and Address of Current Registered Agent
O'BRIEN EDWARD W
1215 OVERCASH DR
DUNEDIN FL 34698

10. Name and Address of New Registered Agent
81 Name Gundel, Alison
82 Street Address (P.O. Box Number is Not Acceptable) 1319 Overcash Dr
83
84 City Dunedin FL 85 Zip Code 34698

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Alison C Gundel* 2/15/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P/D ☒ Change ☐ Addition
NAME	KELLER, BONNIE	1.2 NAME	Kinworthy, Joe
STREET ADDRESS	1297 RANCHWOOD DRIVE	1.3 STREET ADDRESS	1198 Ranchwood Dr E
CITY - ST - ZIP	DUNEDIN FL	1.4 CITY - ST - ZIP	Dunedin, FL, 34698
TITLE	S	2.1 TITLE	V/D ☒ Change ☐ Addition
NAME	MCLONDON, ERIC	2.2 NAME	Hensley, Chris
STREET ADDRESS	1335 DINNERBELL LANE	2.3 STREET ADDRESS	1328 Overcash Dr
CITY - ST - ZIP	DUNEDIN FL	2.4 CITY - ST - ZIP	Dunedin, FL 34698
TITLE	Y	3.1 TITLE	S/D ☒ Change ☐ Addition
NAME	MCLONDON, ERIC	3.2 NAME	Gundel, Linda
STREET ADDRESS	1335 DINNERBELL LN., E	3.3 STREET ADDRESS	1179 Overcash Dr
CITY - ST - ZIP	DUNEDIN FL	3.4 CITY - ST - ZIP	Dunedin, FL 34698
TITLE	D	4.1 TITLE	V/D ☒ Change ☐ Addition
NAME	ANTHONY, JACK	4.2 NAME	Gundel, Alison
STREET ADDRESS	1258 DINNERBELL LN.	4.3 STREET ADDRESS	1319 Overcash Dr
CITY - ST - ZIP	DUNEDIN FL	4.4 CITY - ST - ZIP	Dunedin, FL 34698
TITLE	D	5.1 TITLE	B ☐ Change ☐ Addition
NAME	HORRINK, TONY	5.2 NAME	Horrink, Tony
STREET ADDRESS	1796 HITCHING POST LN.	5.3 STREET ADDRESS	1796 Hitching Post Ln
CITY - ST - ZIP	DUNEDIN FL	5.4 CITY - ST - ZIP	Dunedin, FL 34698
TITLE	D	6.1 TITLE	P ☒ Change ☐ Addition
NAME	KENWORTHY, JOSEPH	6.2 NAME	Roeder, Carl
STREET ADDRESS	1198 RANCHWOOD DR. E.	6.3 STREET ADDRESS	1756 Hitching Post Ln
CITY - ST - ZIP	DUNEDIN FL	6.4 CITY - ST - ZIP	Dunedin, FL 34698

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 110.07(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: *Alison C Gundel* 2/15/95 445-4207
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone