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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731888

1. Corporation Name

RANCHWOOD ESTATES HOMEOWNERS ASSOC. INC

Principal Place of Business

1198 RANCHWOOD DR. E
1230 RANCHWOOD DRIVE
DUNEDIN FL 34698
US

Mailing Address

1179 OVERCASH DRIVE
DUNEDIN FL 34698
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

02/18/1975

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

9. Name and Address of Current Registered Agent

GUNDELL, LINDA
1179 OVERCASH DRIVE
DUNEDIN FL 34698

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 PD ☒ DELETE
NAME KOCH, LAWRENCE
STREET ADDRESS 1266 STONEY BROOK LANE
CITY-ST-ZIP DUNEDIN FL 34698

TITLE VD ☐ DELETE
NAME STAHLHUT, RON
STREET ADDRESS 1207 OVERCASH DR
CITY-ST-ZIP DUNEDIN FL

TITLE TDS ☐ DELETE
NAME GUNDEL, LINDA
STREET ADDRESS 1179 OVERCASH DR
CITY-ST-ZIP DUNEDIN FL

TITLE D ☒ DELETE
NAME WHRIGEK, ANOY
STREET ADDRESS 1211 STONEY BROOK LN
CITY-ST-ZIP DUNEDIN FL

TITLE D ☐ DELETE
NAME HORRINK, TONY
STREET ADDRESS 1796 HITCHING POST LN.
CITY-ST-ZIP DUNEDIN FL

TITLE D ☐ DELETE
NAME ROEDER, CARL
STREET ADDRESS 1756 HITCHING POST LN
CITY-ST-ZIP DUNEDIN FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VD ☐ Change ☒ Addition
1.2 NAME McDermitt, Walt
1.3 STREET ADDRESS 1865 Dinnerbell Lane S.
1.4 CITY-ST-ZIP Dunedin FL 34698

2.1 TITLE PD ☒ Change ☐ Addition
2.2 NAME STAHLHUT, Ron
2.3 STREET ADDRESS 1207 Overcash Dr
2.4 CITY-ST-ZIP Dunedin FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Whitelaw, Bob
4.3 STREET ADDRESS 1776 Overcash Dr
4.4 CITY-ST-ZIP Dunedin FL 34698

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 stated 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 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, with all other like empowered.

SIGNATURE: *[Signature]* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/7/99

813-736-6397

CR2E037 (11/98)