FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION PANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

Principal Place of Business

P.O. BOX 2809

215 NORTH EOLA DRIVE

ORLANDO FL 32802-9809

DOCUMENT #

736442

(5)

215 NORTH EQLA DRIVE

ORLANDO FL 32802-9809

Mailing Address

P.O. BOX 2809

HAPPY TRAILS PROPERTY OWNERS ASSOCIATION, INC.

SSOCIATION, INC.

FILED May 28 1996 8:00 am Secretary of State

|--|--|--|

3a. Date of Last Report

3. Date Incorporated or Qualified

				07/23/1976	02/06/1995			
	Principal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	Applied For
21	26				59-2956369		Not Applicable	
	ite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1	5 Additional	
22 Otto 9 Chata		27					니 Fee	Required
City & State City & State					6. Election Campaign Financing		\$5.00 May Be	
23 Zip	Country	28	1 0.			Trust Fund Contribution	Adde	ed to Fees
24	25	Z _I p	30	untry		8. This corporation has liability for inta		. 199.032,
	9. Name and Address of Curre	[· · ·]	30	T		Florida Statutes	Yes W No	
				81	Name	Hanne drip Address of Hew neg	sector Whatir	
LANC	IOCEDII A							
LANE, JOSEPH A. 215 NORTH EOLA DRIVE			82 Street Address (P.O. Box Number is Not Acceptable)					
				83				
UNLAN	DO FL 32801							
				84	City		FI 85 Z	ıp Code
11. Pursuant to	to the provisions of Sections 617.050	2 and 617.1508. Florida Statut	ies the abo)VP-03	amed corpor	ation submits this statement for the purpo-	and the second second	rosistored off -
Or register	ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	iua. Such chande was aumoriz	zea by me i	corpo	ration's boar	ation submits this statement for the purbol d of directors. I hereby accept the appoint	se or changing its truent as registered	registered office diagent. I am
idi ililai yyit	от, ана ассерстве орнданотѕ от, 5ес	uon o m. 0503, Fiorida Statutes	5.					
SIGNATURE _	Signature, typed or printed name of registered agen	it and title if applicable (NC	OTE Rouisteria	1 Agent	Supplature reduces	f when reinstangai	DATE	
12.		ID DIRECTORS	13.		-31	ADDITIONS/CHANGES TO OFF CE		ORS IN 12
TITLE	SD	DELETE	111	ITLE		. 1 / 77		Addition
NAME	JOHNSON, TERRY		12 N	IAME	1.	BEST TACK		
STREET ADDRESS	8594 KIOWA TR				NODRESS .	BEOT JACK 8178 HAPPY TRAIL	15 RD	
CITY-ST-ZIP	KISSIMMEE FL	/		ITY-ST	-ZIP	KIGOTMACE, Fr 3	ひょりみつ	/
TITLE	PD	DELETE	211			x 150	Channe	Addition
NAME	HARGROVE, BILLY		22 N	AME	'	HENLINE JOHN	•	
STREET ADDRESS	250 PAWNEE TRAIL		238	TREET A	DORESS	HENLINE JOHN 8101 KEEFER TA	112	
CITY-ST-ZIP	KISSIMMEE FL		2 4 0	CITY - ST		KIGHTIAMER BY	84747	
TITLE	D	DELETE	317	ITLE		KIOGIMMEE, FA	Change	Addition
NAME	BOYD, ROY		3 2 N	AME		TID REUBELT, DONNA 230 PANONEE TO ULIONEMALE, E		-
STREET ADDRESS	8708 CHEROKEE TRAIL		335	TREET A	DDRESS	AND PLIONET TO	rasi	
CITY-ST-ZIP	KISSIMMEE FL		34 0	CITY - ST	- 21P	MIGHT MORE	L BATH	9
TITLE	T	DELETE	411			77	☐ Change	Addition
NAME	BOYO, DALE		4.21	IAME		KILLEN JULIE	_	_
STREET ADDRESS	8708 CHEROKEE TRIAL		435	TREET A	.DORESS	8881 CHOCTAN TH	7452	
CITY-ST-ZIP	KISSIMMEE FL		44C	HY-ST.	- ZIP	KIBB TIAINS	Fr 30	4747
TITLE	D	DELETE	511	TLE		PID	Change	Addition
NAME	LEE, BILL		5 2 N	AME		, 	_	_
STREET ADDRESS	55 GOODMAN RD		53S	TREET A	DDRESS			
CITY-ST-ZIP	KISSIMMEE FL		540	ıTY-ST-	- ZIP			
TITLE	D	DELETE	617				☐ Change	Add tion
NAME	DAVIDSON, ANDREW		6 2 N	AM:			_ •	
STREET ADDRESS	410 HANSEN TRAIL		63S	TREET A	.DDRESS			
CITY - ST - ZIP	KISSIMMEE FL		640	ITY-ST	. ZIP			
14. I do hereby	y certify that the information supplied	with this filing is voluntarily furn	ished and	does	not qualify fo	or the exemption stated in Section 119.07(3)/k) Florida Statu	too I further

To the buy can write information supplied with this iming is voluntarily furnished and does not quality 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 proporation 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.

NING OFFICER OR DIRECTOR

SIGNATURE:

5/16/96 407-896-2703



Happy Trails Property Owners Association

Board of Directors 1996

Bill Lee, President 55 N. Goodman Road 396-2703

Jack Best, V. President 8178 Happy Trails Road 396-7086

John Henline, Secretary 8101 Keefer Trail 396-4274

Donna Reubelt, Treasurer 230 Pawnee Trail 396-9223

Julie Kileen, Director 8331 Choctaw Trail 397-0992

All addresses are Kissimee, Florida 34747