

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Jul 09 1998 8:00am
Secretary of State



DOCUMENT # 742972

(3)

1. Corporation Name

ROUND LAKE PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

RT 4 BOX 1703
PALATKA FL 32177
US

RT 4 BOX 1703
PALATKA FL 32177
US

3. Date Incorporated or Qualified

05/23/1978

4. FEI Number

59-2354797

Applied For

Not Applicable

2. Principal Place of Business

21 RT 7 BOX 1710

Suite, Apt. #, etc.

22

City & State

23 PALATKA, FL

Zip

24 32177

Country

25 USA

2a. Mailing Address

26 RT 7 BOX 1710

Suite, Apt. #, etc.

27

City & State

28 PALATKA, FL

Zip

29 32177

Country

30 USA

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HUDGINS, JAMES
RT 4 BOX 1722
PALATKA FL 32177

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

James W. Hudgins
Signature typed or printed name of registered agent and title, if applicable.

James W. Hudgins

(NOTE: Registered Agent signature required when reinstating)

7/8/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PARCHER, GEORGE

STREET ADDRESS RT 4 BOX 1710

CITY-ST-ZIP PALATKA FL

TITLE ☐ DELETE

NAME BECKHAM, GINGER

STREET ADDRESS RT 4 BOX 1731

CITY-ST-ZIP PALATKA FL 32177

TITLE ☐ DELETE

NAME CREEL, JANE

STREET ADDRESS RT 4 BOX 1711

CITY-ST-ZIP PALATKA FL 32177

TITLE ☐ DELETE

NAME HUDGINS, JAMES

STREET ADDRESS RT 4 BOX 1722

CITY-ST-ZIP PALATKA FL 32177

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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.

SIGNATURE

James W. Hudgins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/98

Date

904.325.2857

Daytime Phone #

CR2E037 (5/98)