FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

743931

(8)

THE COLONIES CONDOMINIUM ASSOCIATION, INC.

2180 W S	TATE RD 494 STE 5000 OD FL 92779	2180 W STATE RD 434 STE 5000 LONGWOOD FL 32778-5044	
Principal	Place of Business	Mailing Address	

FILED May 20 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						(400 400	INNU IIIIN ININU ININU III)	811 9 1#11 9 1#		
2180 W STATE RD 434 STE 5000 2180 W STATE RD 434 STE 5 LONGWOOD FL 32778 LONGWOOD FL 32779-5044											
						3. Date Incorpora 08/15/19		3a. Date 05	of Last Re /01/199	port 16	
	lace of Business	2a. Ma	iling Address			4. FEI Number	240		Apı	plied For]
21		26				59-18510	046		Not	t Applicable	
Suite, Apt.		27	ite, Apt. #, etc.			5. Certificate of St	latus Desired		8.75 A Fee Rec		
City & State		28	y & State			6. Flection Campa Trust Fund Con			\$5.00 (Added to		
Zip	Country		Zip Coul			or this corporation has income, for interigr					
24	25	29		30	Florida Statutes Yes V 10. Name and Address of New Registered As						4
	9. Name and Address of Curre	nt Hegistere	d Agent	81	Name	10. Name and Add	ress of New He	gistered Age	<u>m</u>		\dashv
				6'	Name						Ţ
	AMES W JR			B2	Street	Address (P.O. Box Numbe	r is Not Acceptal	ole)			
	MANAGEMENT, INC.			83	<u> </u>						-
	STATE RD. 434, SUITE 5000]50							
	OOD FL 32779			84	1				35 Zip C		
11. Pursuant I	to the provisions of Sections 617.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	602 and 617.1 te of Florida 3	508, Florida Statuli Such change was a ction 617,0603, Flo	es, the above authorized b	e-named y the corp	corporation submits this st poration's board of director	atement for the parties. I hereby acce	ourpose of ch pt the appoin	anging its Iment as i	s registered registered	
	m lamiliar with and accept the coll	galions of, se	CHOH 6 17.0303, FR	nica Statuto	٥.						ļ
SIGNATURE _	Signature, typed or printed name of registered a	gent and title if app	sicable (NO1)	Registered Ag	ont signature	required when reinstating)		DATE			ļ
12.		ND DIRECTO		13.		ADDITIONS/CHA	NIGES TO OFFIC				<u>ૄ</u>
TITLE	SD		☐ DELETE	1.1 THLE	i	TD	•		Change	X Addition	Ş
NAME	BENTON, LINDA			1.2 NAME		BOUNDS, AHLON					15
STREET ADDRESS	7340 DANIEL WEBSTER #B			1.3 STREET	I ADDRESS	3201 AARON BUI					Ĭ
CITY-ST-ZIP	WINTER PARK FL		D NE FEE	1.4 CITY -	ST-ZIP	WINTER PARK FI				1 1.400	_ }
TITLE	PD		☐ DELETE	2.1 TITLE			,	L.	Change	Addition	ľ
NAME	CRAIG, JAMES T.	vice.		2.2 NAME							ł
STREET ADORESS	3028 B GEORGE MASON A	VE			T ADDRESS						Ì
CITY-ST-ZIP TITLE	WINTER PARK FL D		DELETE	2.4 CHY- 3.1 THLE	ST-ZIP				Change	Addition	\dashv
NAME	MITCHELL, PETER			31, INLE 32, NAME	ſ			L	DIRECTOR	☐ Voquiqui	
STREET ADDRESS	3701 VALENCIA GROVE LA	NE			t address		•				
CITY-ST-ZIP	ORLANDO FL	-		3.4, CITY-			•				
TITLE	D		DELETE	4.1 TITLE	U1 211				Change	Addition	7
NAME	MENENDEZ, NANCY			4. 2 NAME					•		
STREET ADORESS	7401 A DANIEL WEBSTER (OR .			ADDRESS						1
CITY-ST-ZIP	WINTER PARK FL			4.4 CITY-	1						
Trile	D	_,	DELETE	5.1 TITLE					Change	Addition	7
NAME	JOHNSON, VIRGINIA			5.2 NAME	í		•		-		
STREET ADDRESS	3065 A GOERGE MASON A	VE		4	t address						
CITY-ST-ZIP	WINTER PARK FL			5.4 CITY-							
TITLE	VD		DELFTE	6.1 TO LE					Change	☐ Addition	7
NAME	THAU, BARBARA			6.2 NAME					-	•	
STREET ADDRESS	3060 GEORGE MASON AVE	NUE #D			T ADDRESS						
CITY-ST-ZIP	WINTER PARK FL			6.4 DITY-							

14. I do 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.