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FILED
May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **747257** (4)
1. Corporation Name
CIMARRON HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business 1111 CIMARRON CIR NW BRADENTON FL 34209-8139 US	Mailing Address 1111 CIMARRON CIR NW BRADENTON FL 34209-8139 US	3. Date Incorporated or Qualified 05/18/1979
		4. FEI Number 59-2024852
		Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 916 CIMARRON CIR NW	2a. Mailing Address 26 916 CIMARRON CIR NW	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
City & State 23 BRADENTON, FL	City & State 28 BRADENTON, FL	7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Zip 24 34209	Country 25 USA	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Zip 29 34209	Country 30 USA	

6. Name and Address of Current Registered Agent PATTISON, HERBERT 1111 CIMARRON CIR NW BRADENTON FL 34209		10. Name and Address of New Registered Agent	
		81 Name ADOLPHSON, EDWARD	
		82 <input checked="" type="checkbox"/> 916 CIMARRON CIR NW Acceptable)	
		83	
		84 City BRADENTON,	85 FL 34209

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 *Edw. J. Adolphson*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PATTISON, HERBERT		1.2 NAME ADOLPHSON, EDWARD	
STREET ADDRESS 1111 CIMARRON CIR NW		1.3 STREET ADDRESS 916 CIMARRON CIR NW	
CITY-ST-ZIP BRADENTON, FL 00000		1.4 CITY-ST-ZIP BRADENTON, FL 34209	
TITLE DV	<input checked="" type="checkbox"/> DELETE	2.1 TITLE V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CHALTIS, WILLIAM		2.2 NAME LEVINSON, MIKE	
STREET ADDRESS 1107 CIMARRON CIR NW		2.3 STREET ADDRESS 904 CIMARRON CIR NW	
CITY-ST-ZIP BRADENTON, FL 00000		2.4 CITY-ST-ZIP BRADENTON, FL 34209	
TITLE DS	<input checked="" type="checkbox"/> DELETE	3.1 TITLE S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WILSON, GREGORY		3.2 NAME GOOD, JOAN	
STREET ADDRESS 919 CIMARRON CIR NW		3.3 STREET ADDRESS 1008 CIMARRON CIR NW	
CITY-ST-ZIP BRADENTON, FL 00000		3.4 CITY-ST-ZIP BRADENTON, FL 34209	
TITLE T	<input checked="" type="checkbox"/> DELETE	4.1 TITLE T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PATTISON, JOANNE		4.2 NAME GUTFREUND, MARY	
STREET ADDRESS 1111 CIMARRON CIR NW		4.3 STREET ADDRESS 1004 CIMARRON CIR NW	
CITY-ST-ZIP BRADENTON, FL 00000		4.4 CITY-ST-ZIP BRADENTON, FL 34209	
TITLE D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BLACKWOOD, DEBBIE		5.2 NAME STURM, JOHN	
STREET ADDRESS 1208 CIMARRON CIR NW		5.3 STREET ADDRESS 915 CIMARRON CIR NW	
CITY-ST-ZIP BRADENTON FL		5.4 CITY-ST-ZIP BRADENTON, FL 34209	
TITLE D	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CHALTIS, SPIRO		6.2 NAME	
STREET ADDRESS 1003 CIMARRON CIR NW		6.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL		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: *Edw. J. Adolphson* **EDW. J. ADOLPHSON** **19 MARCH 1998 941-792-3788**

CR2E037 (10/97)