

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 747579 (1) 1. Corporation Name ESCONDIDO COMMUNITY ASSOCIATION, INC.					
Principal Place of Business ESCONDIDO CLUBHOUSE ALTAMONTE SPRINGS FL 32701-5079		Mailing Address ESCONDIDO CLUBHOUSE ALTAMONTE SPRINGS FL 32701-5079			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/11/1979 3a. Date of Last Report 02/15/1995 4. FEI Number 59-2018066 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent ADMIRAL MANAGEMENT INC 2180 W STATE ROAD 434 SUITE 5000 LONGWOOD FL 32779			10. Name and Address of New Registered Agent 81 Name AL POZEFSKY 82 Street Address (P.O. Box Number is Not Acceptable) 101 HATTAWAY DRIVE 83 84 City ALTAMONTE SPRINGS, FL 85 Zip Code 32701		
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 ABBOTT POZEFSKY (NOTE: Registered Agent signature required when reinstating) DATE 4-9-96					
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP PD FRASER, DICK 101 HATTAWAY DR UNIT 104 ALTAMONTE SPRINGS FL VD KOTOWSKI, CATHY 101 HATTAWAY DR UNIT 77 ALTAMONTE SPRGS, FL00000 TD FRAASA, BILL 101 HATTAWAY DR UNIT 229 ALTAMONTE SPRGS, FL00000 D POZEFSKY, AL 101 HATTAWAY DRIVE UNIT 238 ALTAMONTE SPRINGS FL D BRUGH, KATHY 101 HATTAWAY DRIVE UNIT 189 ALTAMONTE SPRINGS FL			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE PD 1.2 NAME AL POZEFSKY 1.3 STREET ADDRESS 17 ESCONDIDO CIRCLE #238 1.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 2.1 TITLE D 2.2 NAME KATHY KOTOWSKI 2.3 STREET ADDRESS 8 ESCONDIDO CIRCLE #77 2.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 3.1 TITLE TD 3.2 NAME PAULINE BROCK 3.3 STREET ADDRESS 8 ESCONDIDO CIRCLE #76 3.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 4.1 TITLE D 4.2 NAME DON KASTNER 4.3 STREET ADDRESS 6 ESCONDIDO CIRCLE #56 4.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 5.1 TITLE VD 5.2 NAME JACK TITEN 5.3 STREET ADDRESS 7 ESCONDIDO CIRCLE #66 5.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 6.1 TITLE D 6.2 NAME STANLEY CLARKE 6.3 STREET ADDRESS 4 ESCONDIDO CIRCLE #20 6.4 CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701		
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 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: Abbott Pozefsky President 3/26/96 (407) 339-6162 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 5 (407) 415-96					



300001780383
-04/15/96--01064--010

CR2E037 (12/95)