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May 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **748130** (2)

1. Corporation Name

**CAMPTOWN LESSEES ASSOCIATION, INC.**

Principal Place of Business

**5152 E35 BOGGY CREEK RD  
ST CLOUD FL 34771**

Mailing Address

**5152 E35 BOGGY CREEK RD  
ST CLOUD FL 34771**

3. Date Incorporated or Qualified

**07/19/1979**

4. FEI Number

**59-2400930**

Applied For

Not Applicable

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

2. Principal Place of Business

**21**  
Suite, Apt. #, etc.

**22**  
City & State

**23**  
Zip Country

2a. Mailing Address

**26**  
Suite, Apt. #, etc.

**27**  
City & State

**28**  
Zip Country

9. Name and Address of Current Registered Agent

**CHAMBERS, MRS DOROTHY  
5152 C 1 BOGGY CREEK RD.  
ST CLOUD FL 34771**

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

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DS** ☐ DELETE

NAME **COSMAN, DORIS**  
STREET ADDRESS **5152 G-5 BOGGY CREEK RD**  
CITY-ST-ZIP **ST CLOUD, FL 00000**

TITLE **DT** ☐ DELETE

NAME **LOKKEN, RICHARD**  
STREET ADDRESS **5152 P-25 BOGGY CREEK RD.**  
CITY-ST-ZIP **ST CLOUD, FL 00000**

TITLE **DP** ☐ DELETE

NAME **KAZUK, MARGARET L**  
STREET ADDRESS **5152 BOGGY CRK RD E35**  
CITY-ST-ZIP **ST CLOUD, FL 00000**

TITLE **D** ☐ DELETE

NAME **STEGEN, NORMAN**  
STREET ADDRESS **5152 G-3 BOGGY CREEK RD**  
CITY-ST-ZIP **ST CLOUD, FL 00000**

TITLE **D** ☐ DELETE

NAME **WATERHOUSE, CHARLES**  
STREET ADDRESS **5152 F-8 BOGGY CREEK RD.**  
CITY-ST-ZIP **ST CLOUD, FL 00000**

TITLE **VD** ☐ DELETE

NAME **PROUTY, EVERETT**  
STREET ADDRESS **5152 F14 BOGGY CREEK RD**  
CITY-ST-ZIP **ST CLOUD FL**

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: **DORIS COSMAN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/27/98**

Date

**407-957-5246**

Daytime Phone # **0083821**

CR2E037 (10/97)

The following are also directors and we<sup>4</sup> also directors listed on last year's report.

Bilinovich, Wilma  
5152 E33 Boggy Creek Rd.  
St. Cloud, Fl. 34771

Nelson, Morris  
5152 F19 Boggy Creek Rd.  
St. Cloud, Fl. 34771

Woitalla, Lewis  
5152 A42 Boggy Creek Rd.  
St. Cloud, Fl. 34771