NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 749061

1. Corporation Name

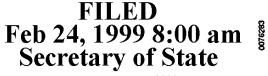
FLYING LITTLE RIVER HOME OWNER'S ASSOCIATION. IN

Principal Place of Business
P.O. BOX 81
MCALPIN FL 32062
US

Mailing Address

P.O. BOX 81 MCALPIN FL 32062

US



02-24-1999 90188 030 ****61.25

	1181 1191 BAN 01	615 6 1831 6 1811 61831 1 06	l

2. Principal P	face of Business	2a. Mailing Address	-		3. Date Incorporated or Qualifed				
21		26			09/25/1979				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number	Applied			
22		27			59-2542409	Not App			
City & State City & State					5. Certifcate of Status Desired	\$8.75 Addition			
28						Fee Require	d		
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00 May I	Ве		
24	25	29 30	0		Trust Fund Contribution	Added to Fee	es _		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registe	red Agent			
			81	81 Name					
LAUNT, F	OREDT E		82	82 Street Address (P.O. Box Number is Not Acceptable)					
· · · · · · · · · · · · · · · · · · ·	RD PLACE		02	31 881 Addiess (F.C. Box Number is 1401 Acceptable)					
	FL 32062		83						
MCALFIN	rL 32002								
			84	City		FL 85 Zip Code			
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the above	-named c	orporation submits this statement for the purpos	e of changing its regist	tered		
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth	ionzed by i	the corpor	ation's board of directors. I hereby accept the a	ppointment as registere	ed		
_	,,								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent	signatura req	uired when reinstating) DAT		_		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER				
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition		
NAME	NEWBEGIN, JAMES	į	1.2 NAME						
STREET ADDRESS	18053 75TH PLACE		1.3 STREET	ADDRESS					
CITY-ST-ZIP	MCALPIN FL 32062		1.4 CITY-ST	-ZIP		•			
TITLE	VPD	☐ DELETE	2.1 TITLE	· .		Change	Addition		
NAME.	CARR, TRUMAN	_	2.2 NAME		•				
	i		2.3 STREET	ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP	LIVE OAK FL 32060	DELETE	2.4 CITY-ST 3.1 TITLE	-ZIP ~	T. D. marate	Change D	Addition		
TITLE	TD	Detere		/·	Treasurer - Director James In Sturte 18204 77 77 Place	Vant	,		
NAME	LAUNT, ROBERT		3.2 NAME		James In STUPIC	, , ,			
STREET ADDRESS	** ** • · · · · · · · · · · · · · · · ·		3.3 STREET	ADDRESS	MCALA FL 32	112			
CITY-ST-ZIP	MCALPIN FL 32062		3.4. CITY- \$1	-ZIP	MCAlpin, Fl. 32	**Change	Addition		
TITLE	-90	☐ DELETE	4.1 TITLE		Director	Cusude []	Addition		
NAME /	ASHLEY, PETE	7	4. 2 NAME						
STREET ADDRESS	762 CALIFORNIA WOODS CIRCI	.E /	4.3 STREET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32824		4.4 CITY-ST	- ZiP					
TITLE	D	☐ DELETE	5.1 TITLE			☐ Change ☐	Addition]		
NAME	HARTMAN, CAROL		5.2 NAME				1		
STREET ADDRESS	18433 73RD PLACE		5.3 STREET	ADDRESS					
CITY-ST-ZIP	MCALPIN FL 32062		5.4 CITY-ST	-ZIP					
TITLE	D	DELETE	6.1 TITLE	Τ.	Secretary - Direct Marion R. Spiller 18251 75 TH Place	To f Change 🗆 🗆	Addition		
NAME	MARSON, MARILYN	, '	6.2 NAME	1.	Marion R. Spiller	-			
STREET ADDRESS			6.3 STREET	ADDRESS	18251 75 TH Place	<u>జ</u> _			
!			6.4 CITY-ST		MCAlpin, Fl. 3	12067			
CITY-ST-ZIP	MIAMI FL		\$1 \$44 F 64		<u>, , , , , , , , , , , , , , , , , , , </u>				

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, with all other like empowered.

SIGNATURE:

1-10-98 9849631319