NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 756849

1. Corporation Name

JAPANESE GARDENS HOMEOWNERS CORPORATION, INC.

Principal Place of Business JAPANESE GARDENS 6181 TEAHOUSE RD VENICE FL 34293

2. Principal Place of Business

Mailing Address

2a. Mailing Address

6181 TEAHOUSE ROAD VENICE FL 34293

FILED Mar 22, 1999 8:00 am § Secretary of State

03-22-1999 90114 026 ****61.25



3. Date Incorporated or Qualifed

	Flace of business	26	26				1	03/19/1981					
Suite, Ap	t. #. etc.	201	Suite, Apt.,#, etc.	-			4: FEI Number			Applied F	or		
22		27	27					59-2080104			Not Applic	cable	
City & St	ate	1	City & State					5. Certificate of Status Desired		•	5 Addition		
23		28	28					5. Certificate of Status Desired	ш	Fee	e Required		
Zip	Country	Country Zip C						6. Election Campaign Financing		\$ 5.	00 May B	e	
24	25 29 30							Trust Fund Contribution			Added to Fees		
Name and Address of Current Registered Agent								10. Name and Address of New Re	gistered A	gent			
V 6						Name	Name Name						
BRADY, EDWIN L						82 Street Address (P.O. Box Number is Not Acceptable)							
6181 TEAHOUSE RD													
VENICE FL 33595					83			•					
No. 25 of 36 Set					84	City			 _	85	Zip Code		
and the state of t									<u>FĻ</u>	بلل			
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													
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board or directors. Thereby 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 title if applicable. (NOTE: Registered							equired wit	hen reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEDS AND	OIRE	CTORS IN	12	
12.	OT FIGURE STATE OF THE STATE OF							ADDITIONS/CHANGES TO CITT	OLING AIN	□ Cha		ddition	
TITLE	S		☐ DELETE	1.1 111							go		
NAME	SHONGOOD, RUTH J.E				1.2 NAME							ł	
STREET ADDRE	500 MORNING GLORY DRIVE					ADDRESS						Ì	
CITY-ST-ZIP	VENICE FL				1.4 CITY-ST-ZIP					[]Cha	T/	Addition	
TITLE	T DELETE				2.1 TITLE						ilge 🗀 r	AUGUIUGII	
NAME	TAYLOR, JOHN			2.2 NA									
STREET ADORE				2.3 STI	REET	ADDRESS				•	•	.	
CITY-ST-ZIP	VEITIQE 1 & 0 1200				2. 4 CITY-ST-ZIP					□ Cha	X	Addition	
TITLE	D		⊠ DELETE	3.1 TFT	LE	Y	/ P	1 O N - I		∐ Cna	nge 1⊡ A	ACCIONI	
NAME	POUDRIER, HERVE			3.2 NA	ME			arles G. Nelson					
STREET ADDRE	ss 6211 DAFFODIL ROAD		•	3.3 ST	REET.	ADORESS		Oriental Poppy					
CITY-ST-ZIP	<u></u>			3.4. CF				nice, FL 34293_		<u></u>			
TITLE	D		DELETE	4.1 TIT	LE	- 1				☐ Cha	inge ∐ /	Addition	
NAME	BOWSER, GEORGINA			4. 2 N	ME								
STREET ADDRE	ss 5740 FORSYTHIA RD.			4.3 ST	REET	ADDRESS						.	
CiTY-ST-ZIP	VENICE FL			4.4 CIT	Y-ST	-ZIP					V		
TITLE	VP		DELETE	5.1 गा]	D			Cha	inge יבוי	Addition	
NAME	CAMPION, NORMA			5.2 NA				rbert Newell					
STREET ADDRE	3/20 ORANGE DE0330M						641	1 Delphinium					
City-St-ZIP	VENICE FL 34293			5.4 CD		-ZIP	Ver	nice, FL 34293		F-101		Addition	
TITLE	Parin		☐ DELETE	6.1 TIT		{	į			Cha	лде <u>Г</u> ., А	Addition	
NAME	BRADY, EDWIN L			6.2 NA									
STREET ADDRE	ss 5631 ORANGE BLOSSOM			6.3 ST	REET	ADDRESS							
CITY-ST-ZIP	VENICE FL 34293		The day as much for	6.4 CIT	_			tion 110 07/2\/i\ Elorida Statutos II					

Inerepty 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.