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95 APR 18 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 759041 (7)

1. Corporation Name

HOLIDAY SPRINGS AT SUNTREE PROPERTY OWNERS' ASSO
CIATION, INC.

Principal Place of Business

Mailing Address

LEGAL DEPT 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

LEGAL DEPT 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/07/1981

3a. Date of Last Report

04/27/1994

4. FEI Number

59-2416978

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEFFREY, THOMAS W
LEGAL DEPT 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

81 Name

Marcia H. Langley

82 Street Address (P.O. Box Number is Not Acceptable)

Attn: Legal Department

83

2601 S. Bayshore Drive

84 City

Miami

FL

85 Zip Code

33133

11. Pursuant to the provisions of Sections 607.0543 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or officer or director

(NOTE: Registered Agent signature required when reinstating)

DATE

Marcia H. Langley

3/23/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	SMITH, DAVID L
STREET ADDRESS	9801 SO FEDERAL HWY
CITY, ST, ZIP	FT ST LUCIE FL
TITLE	DTV
NAME	BRANSON, DAVID A
STREET ADDRESS	2601 S BAYSHORE DR 4 FL
CITY, ST, ZIP	MIAMI FL
TITLE	SV
NAME	LANGLEY, MARCIA H
STREET ADDRESS	2601 S BAYSHORE DR 9 FL
CITY, ST, ZIP	MIAMI FL
TITLE	DVA
NAME	KULCZYCKI, GEORGE
STREET ADDRESS	5240 BABCOCK STR NE, RM 202
CITY, ST, ZIP	PALM BAY FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	DVT	☐ Change ☒ Addition
1.2 NAME	Matthew J. Allen	
1.3 STREET ADDRESS	2601 S. Bayshore Drive	
1.4 CITY, ST, ZIP	Miami, FL 33133	
2.1 TITLE	VA	☐ Change ☒ Addition
2.2 NAME	Thomas W. Jeffrey	
2.3 STREET ADDRESS	2601 S. Bayshore Drive	
2.4 CITY, ST, ZIP	Miami, FL 33133	
3.1 TITLE	DVS	☒ Change ☐ Addition
3.2 NAME	Marcia H. Langley	
3.3 STREET ADDRESS	2601 S. Bayshore Drive	
3.4 CITY, ST, ZIP	Miami, FL 33133	
4.1 TITLE	DP	☒ Change ☐ Addition
4.2 NAME	George R. Kulczycki	
4.3 STREET ADDRESS	2601 S. Bayshore Drive	
4.4 CITY, ST, ZIP	Miami, FL 33133	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

000001460180

-04/19/95--01094--011 Addition

2340.00 *130.00

\$87 4/18

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marcia H. Langley

3/23/95

(305) 859-4000