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Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
**1997**

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

DOCUMENT # 759180 (3)

1. Corporation Name

CORMORANT POINT HOMEOWNERS' ASSOCIATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| ~~2921 SUMMRTREE DRIVE~~<br>~~SEBRING FL 33872~~<br>~~US~~ 2224 GOLF HAMMOCK CR.<br>SEBRING, FLA. 33872-1209 | 2224 GOLF HAMMOCK CIRCLE<br>SEBRING FL 33872-1209<br>US |

| | |
|---|---|
| 2. Principal Place of Business<br>21 2224 Golf Hammock CR<br>Suite, Apt. #, etc.<br>22 SEBRING, FLA.<br>City & State<br>23 33872-1209 USA<br>Zip / Country<br>24 / 25 | 2a. Mailing Address<br>26<br>Suite, Apt. #, etc.<br>27<br>City & State<br>28<br>Zip / Country<br>29 / 30 |

| | |
|---|---|
| 3. Date Incorporated or Qualified<br>07/15/1981 | 3a. Date of Last Report<br>02/12/1996 |
| 4. FEI Number<br>59-2177796 | ☐ Applied For<br>☐ 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 |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No | |

| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
|---|---|
| SYNDER, DUANE W.<br>2921 SUMMERTREE DR<br>SEBRING FL 33872 | 81 Name: VIRGINIA D. THRALL<br>82 Street Address (P.O. Box Number is Not Acceptable): 2224 GOLF HAMMOCK CR.<br>83 SEBRING<br>84 City: FL 85 Zip Code: 33872 |

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: Virginia D. Thrall — 2/5/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>SNYDER, DUANE W.<br>2921 SUMMERTREE DR.<br>SEBRING FL | ☒ DELETE | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | SD<br>VIRGINIA D. THRALL<br>2906 SUGARPINE CR.<br>SEBRING, FLA. 33872 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>STEWART, ELIZABETH<br>3704 GOLF HAVEN TERRACE<br>SEBRING FL | ☐ DELETE | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | FD<br>GEORGE HUGHES<br>3405 GOLF HAVEN TERRACE<br>SEBRING, FLA. 33872 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>HELBLING, MILDRED<br>2910 WATERWOOD DR.<br>SEBRING FL | ☐ DELETE | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | D<br>CARL DERBY<br>3010 SUGARPINE CR.<br>SEBRING, FLA. 33872 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>YANCEY, RICHARD<br>2914 SUGARPINE CIRCLE<br>SEBRING FL | ☐ DELETE | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SPARKS, JIM<br>2924 SUGARPINE CIR<br>SEBRING FL | ☐ DELETE | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | VID<br>Jim Sparks<br>2924 SUGARPINE CR.<br>SEBRING, FLA. 33872 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (9/96)

14. I do 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:** Virginia D. Thrall VIRGINIA D. THRALL — 2/5/97 — 941/382-8360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0054415