

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **759180** (3)
1. Corporation Name
CORMORANT POINT HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business 2224 GOLF HAMMOCK CIRLCE SEBRING FL 33872-209 US	Mailing Address 2224 GOLF HAMMOCK CIRCLE SEBRING FL 33872 US
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3. Date Incorporated or Qualified 07/15/1981
4. FEI Number 59-2177796
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 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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9. Name and Address of Current Registered Agent THRALL, VIRGINIA D 2224 GOLF HAMMOCK CIRCLE SEBRING FL 33872	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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 _____ (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 THRALL, VIRGINIA D 2906 SUGARPINE CIRCLE SEBRING FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	TD VIRGINIA D. THRALL 2906 SUGARPINE CR. SEBRING, FL, 33872 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEWART, ELIZABETH 3704 GOLF HAVEN TERRACE SEBRING FL ☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	SD FRANK MERENDA 3012 SUGARPINE CR. SEBRING, FL, 33872 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELBLING, MILDRED 2010 WATERWOOD DR. SEBRING FL ☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D FRANCIS KEDDERLY 3405 CORMORANT POINT DR. SEBRING, FL, 33872 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANCEY, RICHARD 2014 SUGARPINE CIRCLE SEBRING FL ☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ALICE M. FRASER 3506 WATERWOOD DR. SEBRING, FL, 33872 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPARKS, JIM 2024 SUGARPINE CIR SEBRING FL ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUGHES, GEORGE 3405 GOLF HAVEN TERRACE SEBRING FL ☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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 _____

CR2E037 (1097)