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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT #

759259

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1 IIIIOLI1	IWAY COMMUNITY ASSOC	CIATION, INC.							
Principal Place of Business Mailing Address						! IO BIST THEE! DITION INSIDE PROOF BUT	0 1011 B1811 B181	H WIWIL WHOLI	Mider Babs (Ab)
2631 NW 41 ST. SUITE E-1 P.O. BOX 147050 GAINESVILLE FL 32614-4050		2631 NW 41 ST. SUITE E-1 P.O. BOX 147050 GAINESVILLE FL 32614-4050							
						3. Date Incorporated or Qualified 07/22/1981		e of Last I 03/17/1	
Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number		- t-	Applied For
<u> </u>		26				59-2120174			Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State		City & State				6. Election Campaign Financing	<u> </u>	<del></del>	May Be
]		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip	Cou	untry		8. This corporation has liability for	intangible tax	k under s.	199.032,
	25	29	30			Florida Statutes	Yes 🔲	No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered A	igent	
				81	Name				
	BEVERLY K.			82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
2631 NW	41 STREET SUITE E-1								
GAINESV	NLLE FL 32606			83					
				84	City			<b>85</b> Zig	Code
				$\perp \perp$			FL	<u> </u>	
<ol> <li>Pursuant to</li> </ol>	Success of Sections 6 Provisions of Sections 6 Provisions 6	and 617.1508. Florida Statu	ies, me abo	ove-na	mea corpo	pration submits this statement for the pur	pose oi char ointment ac r	nging its ri realstered	egistered onici agent. I am
or registere	ed agent, or both, in the State of Floric n, and accept the obligations of, Secti	da. Such change was authori.	zed by the s s.	corpor	ation's bo	ard or directors. I hereby accept the appr	olikinen ası		
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