FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

762114 DOCUMENT #
1. Corporation Name

(7)

CARROLLWOOD SOUTH HOMEOWNERS ASSOCIATION, INC.									
Principal Place of Business Mailing Address						4 (69)(1) 19818 6(11) 1981 14831 19811	Sibi Aibil Bidi	1 61911 91911 91	iğir Biğir iğğı
10911 AUTUM 10911 AUTUM TAMPA FL 33	N OAK PL.	10911 AUTUMN OAK PL 10911 AUTUMN OAK PL. TAMPA FL 33624							
US		US			3. Date Incorporated or Qualified 02/25/1982	3a . Da	te of Last F 03/20/19	Report 95	
 Principal Pla 	ace of Business	2a. Mailing Address 26			4. FEI Number 59-2286963		_ 	pplied For ot Applicable	
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional lequired	
City & State)	City & State			6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees
Zφ	Country	Zip	Cou	ntry		· ' -	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		
24	0 Name and Address of Current	29 Registered Agent	30		.	10. Name and Address of New Registered Agent			
Name and Address of Current Registered Agent					Name	in the same state of the same	ogioicios i		
COLLINS, MICHAEL P.						dress (P.O. Box Number is Not Acceptab	le)		
10911 AU TAMPA F	JTUMN OAK PLACE			83			 		
, , , , , , , , , , , , , , , , , , , ,				84	City			85 Zip	Code
					•		FL	. ! !	<u> </u>
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 egent. I am familiar with, and accept the obligations of Section 617.0502, Florida Statutes. SIGNATURE SIGN									
0	Signature, typed or printed name of registered agen, a			Agent s	ignature requ	ired when reinstating)	DATE	DIDECTOR	20 11 40
12.	OFFICERS AND		13.	v. c	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFF		Change	Addition Addition
TITLE	COLLINS, MICHAEL P	•					·		L Koonion
NAME	10911 AUTUMN OAK PL	i i		1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS	TAMPA FL		1.4 CITY-ST-ZIP						
CiTY+SF-7iP TiTLE	TD			2.1 TITLE				Change	Addition
NAME	COLLINS, CAROLE	Пости		2.2 NAME			-	•	_
STREET ADDRESS	10911 AUTUMN OAK PLACE				DDRESS				
CITY-ST-ZIP	TAMPA FL	. Ei		2. 4 CITY - ST - ZIP					
TITLE	N	DELETE	3.1 Ti		D	Twe mann 10909 autumn Co Dimpa, 9L 3360		L etange	Addition
NAME	. DOWDEN BEOKY		32 N/	AME	- 1	10000 audiens	HA P.)	
STREET ADDRESS	10905 AUTUMN OAK DR.		3.3 \$1	TREET AI	DORESS	A 20 0 336	34		ļ
CITY-ST-ZIP	TÁMPA FL		3 4. C	(TY-ST	- ZIP	umpa, 90 3300	<i>-</i>		
TITLE	DS	DELETE	4.1 Ti	TLE		•	l	Change	☐ Addition
NAME	VALENTI, DONNA		4. 2 N	EAME					
STREET ADORESS	4424 SUMMER OAK DRIVE		4.3 ST	TREET A	ODRESS				
CITY-ST-ZIP	TAMPA, FL 00000			TY-ST-	ZIP				
TITLE	D OUDTING TIME	DELETE	5 1 Ti		١.		l	Change	Addition
NAME	CURTIN, TIM		52 N						
STREET ADDRESS	10909 WINTER OAK DR.				DDRESS				
CITY-ST-ZIP	TAMPA, FL 00000			TY-ST-		<u> </u>		2 €halinge	Addition
TITLE	VD SIMMONS, JEFF	DELETE	6171		14	Russ Pratt		CHRICE	T VOUITION
NAME	4441 SDMMER OAK DRIVE		6.2 N			The state of the s	ChA 1	PL	
STREET ADDRESS	TAMPA, FL 00000				DORESS	10905 augunt	1 20	201	
City-St-ZiP	·	ith this filing is voluntarily for		does		for the exemption stated in Section 119	د الرياب رياب . 07(3)(k), Fk	orida Statute	es. I further

actify that the information supplied with this liting is voluntarily furnished and bose for quality for the exemption is activated in Section 113-05/kg, Florida Statutes, furnished and the information indicated on this 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: