## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

763063

NEW PORT RICHEY FL

8544 WINDMILL DR

NEW PORT RICHEY FL

3814 TIDEWATER RD

GOMBOCS, JOHN

ALBURY, CHRIS

8700 WIND MILL DR

**NEW PORT RICHEY FL** 

8642 WOODBRIDGE DR

**NEW PORT RICHEY FL** 

**CREW RAY** 

LALLI, AL

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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NAME

TITLE

NAME

TITLE

NAME

(5)

## GREENBROOK ESTATES HOMEOWNERS ASSOCIATION, INC.

**FILED** Mar 20 1998 8:00am Secretary of State

A NARON KARNA MIKAT IKKIN DUNIA AKAT KIN DERIK BIRKA DIRKI TARIK BIRKA DERIK BIRKA BIRKA RIBKA RIBKA RIBKA BIR

WEW PORT PICHEY FZ. 34653

RICKEY FI. 34655

ADA DE FINA 3838 TIDEWATER RD. NEW PORT RICKEY FI

BEATAILE SEEMAN DR.

3814 TIDEWATER QD

DUXBURY

MARY LALLI

8433

VLW PORT RICHEY FL 3455

NXW PORT RICHEY FL. 34655

BRIDGEWATER DR.

				_	
Principal Place of Business Mailing Address					
3661 MONTCLAIR DR.		3661 MONTCLAIR DR.			
NEW PORT RIC	XHEY FL 34655	NEW PORT RICHEY FL 34655		04/30/1982	
				4. FEI Number	Applied For
				59-2642000	Not Applicable
2. Principal Place of Business 2a. Mailing Address				5. Certificate of Status Desired	\$8.75 Additional
21 26			<del></del>		Fee Required
		Suite, Apt. #, etc.		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State City & S		City & State		7. Is this nonprofit corporation a homeowners association?	
23 28		28	☑ Yes ☐ No		
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25	29 30		Personal Property Tax due June 3	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
81 N				RANK I. GREY	
MARLOWE, RUSSELL G			82 Street Address (P.O. Box Number is Not Acceptable)		
8514 S R 54			Hobby, Anderson & Grey		
NEW PORT RICHEY FL 34653			5709 Tidalwave Drive		
	•			ort Richey	FL   85   Zip Code   34652
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Floride 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 Finds Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Prof. Registered Agent 2-2-98					
Frank Somula (Ingress vinted name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS A		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	P	<b>☑</b> DELETE	1.1 TITLE	LAADA	Change Addition
NAME	LEAHY, CHARLES		1.2 NAME FRA	WCES HARDIN 55 SPRING VALLEY DR-	
STREET ADDRESS	3633 MONTCLAIR DR.	•	1.3 STREET ADDRESS	don't diversity	4
CITY-ST-ZIP	NEW PORT RICHEY FL			V PART RICHEY, FL 34	
TITLE	8		2.1 TITLE	LES VANCE	☐ Change ☐ Addition
NAME	PACK TONI ANN		2.2 NAME /77 7	10 - 1 AA-OU DA	
STREET ADDRESS	8605 WINDMILL DR		2.3 STREET ADDRESS 1377	HT ERIN BROOK DR.	

2.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETÉ

DELETE

DELETE

NEW PORT RICHEY FL 34655 **NEW PORT RICHEY FL** CITY-ST-ZIP 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.

Change

Change

Change

Addition

Addition

Addition

Addition