

FILE NOW: FILING FEE IS \$61.25

FILED

May 14 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 763721 (8)

1. Corporation Name

EDGEWATER PINES ASSOCIATION OF SEMINOLE, FLORIDA
, INC.

Principal Place of Business

10399 67TH AVENUE NORTH
SEMINOLE FL 33772

Mailing Address

10399 67TH AVENUE NORTH
SEMINOLE FL 33772

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

NOYES, HELEN
10399 67TH AVE N.
SEMINOLE FL 33772

3. Date Incorporated or Qualified

06/16/1982

4. FEI Number

59-6531141

Applied For

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

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

10. Name and Address of New Registered Agent

81 Name

Helen Hayes

82 Street Address (P.O. Box Number is Not Acceptable)

10399-67 AVE N #1

83

84 City

Seminole

FL

85 Zip Code

33772

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

Helen P. Hayes Sec. of

May 2, 1998

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE BP ☒ DELETE
NAME WILMOT, ALYCE
STREET ADDRESS 10399 67TH AVENUE NORTH #118
CITY-ST-ZIP SEMINOLE FL 37742

TITLE P ☒ DELETE
NAME JOHNSON, EDMUND
STREET ADDRESS 10399 67TH AVENUE NORTH #92
CITY-ST-ZIP SEMINOLE FL 37742

TITLE S ☒ DELETE
NAME HAYES, HELEN
STREET ADDRESS 10399 67TH AVENUE NORTH #1
CITY-ST-ZIP SEMINOLE FL 37742

TITLE DC ☒ DELETE
NAME NOYES, HELEN
STREET ADDRESS 10399 67TH AVENUE NORTH #13
CITY-ST-ZIP SEMINOLE FL 37742

TITLE D ☒ DELETE
NAME LAPIERRE, ANNE
STREET ADDRESS 10399 67TH AVENUE NORTH #11
CITY-ST-ZIP SEMINOLE FL 37742

TITLE D ☒ DELETE
NAME ARCHAMBAULT, FLORENCE
STREET ADDRESS 10399 67TH AVENUE NORTH #5
CITY-ST-ZIP SEMINOLE FL 37742

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☒ Addition
1.2 NAME WILMOT, ALYCE
1.3 STREET ADDRESS 10399 67TH AVE, NORTH #118
1.4 CITY-ST-ZIP SEMINOLE, FL 33772

2.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
2.2 NAME KRUG, FRED
2.3 STREET ADDRESS 10399 67TH AVE, NORTH #101
2.4 CITY-ST-ZIP SEMINOLE, FL 33772

3.1 TITLE SECRETARY ☐ Change ☒ Addition
3.2 NAME HAYES, HELEN
3.3 STREET ADDRESS 10399 67TH AVE, NORTH #1
3.4 CITY-ST-ZIP SEMINOLE, FL 33772

4.1 TITLE DIRECTOR ☐ Change ☒ Addition
4.2 NAME ALLEN, AL
4.3 STREET ADDRESS 10399 67TH AVE, NORTH #26
4.4 CITY-ST-ZIP SEMINOLE, FL 33772

5.1 TITLE DIRECTOR ☐ Change ☒ Addition
5.2 NAME WICKLINE, CAROL
5.3 STREET ADDRESS 10399 67TH AVE, NORTH #117
5.4 CITY-ST-ZIP SEMINOLE, FL 33772

6.1 TITLE STEVENSON, HAROLD ☐ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS 10399 67TH AVE, NORTH #57
6.4 CITY-ST-ZIP DIRECTOR SEMINOLE, FL 33772

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

Helen P. Hayes

4-11-98

209,1099

CFR2037 (10/97)