

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**  
Mar 15 1996 8:00 am  
Secretary of State

DOCUMENT # **766780 (1)**

1. Corporation Name  
**LAKE WEIR GARDENS PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business: 11940 SE 70TH AVE, P. O. BOX 2232, BELLEVIEW FL 32620  
Mailing Address: 11777 S.E. 71ST TERR ROAD, P.O. BOX 2232, BELLEVIEW FL 34420 US

3. Date Incorporated or Qualified: 02/01/1983  
3a. Date of Last Report: 03/02/1995

2. Principal Place of Business: 21 11893 SE 74th Terr, Suite, Apt. #, etc.  
22 P.O. BOX 2232, City & State  
23 Belleview, Fl. 34420, Zip, Country  
24 34420, 25 Marion, 29 34420, 30 Marion

4. FEI Number: 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  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes  No

9. Name and Address of Current Registered Agent: MASKELL, WILLIAM H, 11777 S.E. 71ST TERR. ROAD, BELLEVIEW FL 34420

10. Name and Address of New Registered Agent: 81 Name: ALLEMEIER, BETTY J., 82 Street Address: 11893 SE 74th Terr, 83, 84 City: BELLEVIEW, FL, 85 Zip Code: 34420

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: ALLEMEIER, BETTY J. (Signature: Betty J. Allemeier), DATE: 2/5/96

12. OFFICERS AND DIRECTORS		DELETED
TITLE: DP	HASKELL, WILLIAM H	<input checked="" type="checkbox"/>
STREET ADDRESS: 11777 S.W. 71ST TERR. ROAD		
CITY - ST - ZIP: BELLEVIEW FL		
TITLE: DVP	COWAN, ROBERT	<input checked="" type="checkbox"/>
STREET ADDRESS: 12146 SE 74TH TERRACE		
CITY - ST - ZIP: BELLEVIEW FL		
TITLE: S	MASKELL, VIRGINIA	<input type="checkbox"/>
STREET ADDRESS: 11777 SE 71ST TERR. RD.		
CITY - ST - ZIP: BELLEVIEW FL		
TITLE: DC	EVENS, BOB	<input checked="" type="checkbox"/>
STREET ADDRESS: 7365 SE 119TH PLACE		
CITY - ST - ZIP: BELLEVIEW FL		
TITLE: T	JORDAN, REBA	<input type="checkbox"/>
STREET ADDRESS: 11852 SE 71ST CT		
CITY - ST - ZIP: BELLEVIEW FL		
TITLE: D	LEACH, (MESSNER) A	<input checked="" type="checkbox"/>
STREET ADDRESS: 11705 SE 72ND CT RD		
CITY - ST - ZIP: BELLEVIEW FL		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
11 TITLE: DP	ALLEMEIER, BETTY J.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 NAME: 11893 SE 74th TERR			
13 STREET ADDRESS: BELLEVIEW, FL. 34420			
14 CITY - ST - ZIP: BELLEVIEW, FL. 34420			
21 TITLE: DVP	BYRD, NORMA M	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22 NAME: 7275 SE 120 Ln			
23 STREET ADDRESS: BELLEVIEW, FL 34420			
24 CITY - ST - ZIP: BELLEVIEW, FL 34420			
31 TITLE: [Barcode]			
32 NAME: 03/18/96 -01027--014			
33 STREET ADDRESS: ***61.25			
34 CITY - ST - ZIP: BELLEVIEW, FL 34420			
41 TITLE: DC	CAMPANY, GRACE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
42 NAME: 11614 SE 72 TERR. RD.			
43 STREET ADDRESS: BELLEVIEW, FL. 34420			
44 CITY - ST - ZIP: BELLEVIEW, FL. 34420			
51 TITLE: [Handwritten: Change]			
52 NAME: [Handwritten: Addition]			
53 STREET ADDRESS: [Handwritten: 3/15/96]			
54 CITY - ST - ZIP: BELLEVIEW, FL. 34420			
61 TITLE: D	GARLOCK, RICHARD	<input checked="" type="checkbox"/>	<input type="checkbox"/>
62 NAME: 11755 SE 71 CT			
63 STREET ADDRESS: BELLEVIEW, FL. 34420			
64 CITY - ST - ZIP: BELLEVIEW, FL. 34420			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: JORDAN, REBA (Signature: Reba Jordan), DATE: 2/5/96, 352-347-5549

CR2E037 (12/95)