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04-19-1999 90134 034 ****61.25

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768295

1. Corporation Name

BIG CYPRESS NATIONAL PRESERVE EXEMPT PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

RTY OWNERS ASSOCIATION, INC.
5901 SW 114 TERRACE
MIAMI FL 33156-5030

Mailing Address

RTY OWNERS ASSOCIATION, INC.
5901 SW 114 TERRACE
MIAMI FL 33156-5030



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

05/05/1983

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

HOUGHTON, RICHARD
5901 SW 114 TERRACE
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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 PD
NAME HOUGHTON, RICHARD
STREET ADDRESS 5901 SW 114 TERRACE
CITY-ST-ZIP MIAMI FL

DELETE

TITLE VD
NAME LASSITER, DALE
STREET ADDRESS 1030 ORIOLE AVE
CITY-ST-ZIP MIAMI SPRINGS FL

DELETE

TITLE STD
NAME DUNCAN, NORVEL R.
STREET ADDRESS 13701 SW 84TH ST
CITY-ST-ZIP MIAMI FL

DELETE

TITLE D
NAME MURPHY, DONALD A.
STREET ADDRESS 6600 SW 26TH ST
CITY-ST-ZIP MIRAMAR FL

DELETE

TITLE D
NAME ROSHER, RICHARD
STREET ADDRESS 8730 SW 114 ST
CITY-ST-ZIP MIAMI FL

DELETE

TITLE D
NAME ROBERTS, EDWARD
STREET ADDRESS 7820 SW 158 TERRACE
CITY-ST-ZIP MIAMI FL

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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)(l), 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, with all other like empowered.

SIGNATURE: *Richard Houghton* SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-14-99 305 667-6273
Date Daytime Phone #

CR2E037 (1/1/98)