

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

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**May 20 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 # 769680 (0)  
1. Corporation Name  
CEDAR RUN OF MELBOURNE HOMEOWNERS ASSOCIATION, I NC.



Principal Place of Business: P.O. BOX 361052 MELBOURNE FL 32936  
Mailing Address: P.O. BOX 361052 MELBOURNE FL 32936

3. Date Incorporated or Qualified: 08/03/1983  
4. FEI Number: 59-2516749  
Applied For: Not Applicable

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, City, State, Zip, and Country.

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

9. Name and Address of Current Registered Agent: PATTERSON, JOAN, 3731 HARDWOOD CT, CEDAR RUN, MELBOURNE FL 32935

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	
NAME	DEBRECENY, EUGENIA	1.2 NAME	
STREET ADDRESS	3687 DRIFTWOOD DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	VP
NAME	WILLIAM POND	2.2 NAME	Mabel Funkhouser
STREET ADDRESS	3671 BRENTWOOD DR.	2.3 STREET ADDRESS	3669 meadowwood ct
CITY-ST-ZIP	MELBOURNE FL	2.4 CITY-ST-ZIP	Melbourne, FL 32935
TITLE	DP	3.1 TITLE	DP
NAME	LACROIX, MELVIN	3.2 NAME	Howard Thompson
STREET ADDRESS	3725 BRENTWOOD DR.	3.3 STREET ADDRESS	3680 Dogwood ct
CITY-ST-ZIP	MELBOURNE FL	3.4 CITY-ST-ZIP	Melbourne, FL 32935
TITLE	T	4.1 TITLE	T
NAME	RUNFOLA, JANICE	4.2 NAME	Cheryl Marbry
STREET ADDRESS	3672 TREELINE BLVD.	4.3 STREET ADDRESS	3688 Brentwood ct
CITY-ST-ZIP	MELBOURNE FL	4.4 CITY-ST-ZIP	Melbourne, FL 32935
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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: Cheryl Marbry 11/30/98 4072424513

CR2E037 (10/97)