

FILE NOW: FILING FEE IS \$61.25

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Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **769884** (8)
1. Corporation Name
SEVENTH JUNGLE DEN VILLAS ASSOCIATION, INC.

Principal Place of Business 1640 JUNO TRAIL ASTOR FL 32102-4940	Mailing Address 1640 JUNO TRAIL ASTOR FL 32102-4940
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3. Date Incorporated or Qualified 08/17/1983	
4. FEI Number 59-2401492	Applied For ☐ Not Applicable

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
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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 JOHNSON, NORD L. 233 EAST RICH AVENUE DELAND FL 32724

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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	
TITLE	PD LAURANCE, J. P. ☐ DELETE
NAME	1640 JUNO TRAIL
STREET ADDRESS	ASTOR FL
CITY-ST-ZIP	
TITLE	VD SPIVEY, JAMES W. ☐ DELETE
NAME	1640 JUNO TRAIL
STREET ADDRESS	ASTOR FL
CITY-ST-ZIP	
TITLE	T BURNS, BETTY J. ☐ DELETE
NAME	1640 JUNO TR., 204F
STREET ADDRESS	ASTOR FL
CITY-ST-ZIP	
TITLE	SD LUDWIG, CANDY ☐ DELETE
NAME	1640 JUNO TRAIL
STREET ADDRESS	ASTOR FL
CITY-ST-ZIP	
TITLE	D REEVES, JIM ☒ DELETE
NAME	1640 JUNO TR
STREET ADDRESS	ASTOR FL
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Director ☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	President-Director ☒ 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	V. President-Director ☐ Change ☒ Addition
5.2 NAME	Robert Pound
5.3 STREET ADDRESS	1640 Juno TR - 204F
5.4 CITY-ST-ZIP	Astoria, FL 32102
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)(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: Betty J. Burns RECEIVED 1/20/98 904-749-2727

CR2E037 (10/97)