

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90075 020 ****61.25

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DOCUMENT # 770137

1. Corporation Name

NORTHEAST HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

P.O. BOX 70303
OCALA FL 34470

Mailing Address

P.O. BOX 70303
OCALA FL 34470
US



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

3. Date Incorporated or Qualified

08/11/1983

4. FEI Number

59-2445171

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

SASSO, PATRICIA
3140 NE 49TH ST
OCALA FL 34479

10. Name and Address of New Registered Agent

81

Name

Keele, Aden

82

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

4231 NE 22nd CT

83

84

City

Ocala,

FL

85

Zip Code

34479

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

Aden J. Keele
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 **P** ☒ DELETE
NAME **SASSO, PATRICIA**
STREET ADDRESS **3140 NE 49 ST**
CITY-ST-ZIP **OCALA FL**

TITLE **VP** ☐ DELETE
NAME **MAUTNER, HOWARD**
STREET ADDRESS **3150 NE 36 AVE #166**
CITY-ST-ZIP **OCALA FL**

TITLE **S** ☐ DELETE
NAME **KUIKEN, JEAN**
STREET ADDRESS **3425 NE 45TH ST**
CITY-ST-ZIP **OCALA FL 34479**

TITLE **T** ☐ DELETE
NAME **GALIPO, HARLEAN**
STREET ADDRESS **3580 NE 43RD PL.**
CITY-ST-ZIP **OCALA FL**

TITLE **D** ☐ DELETE
NAME **NELSON, JERRY**
STREET ADDRESS **3660 NE 17TH AVE**
CITY-ST-ZIP **OCALA FL 34479**

TITLE **D** ☒ DELETE
NAME **KEELE, ADEN**
STREET ADDRESS **4231 NE 22ND CT**
CITY-ST-ZIP **OCALA FL 34479**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☐ Change ☒ Addition
1.2 NAME **Keele, Aden**
1.3 STREET ADDRESS **4231 NE 22nd Ct**
1.4 CITY-ST-ZIP **Ocala, FL 34479**

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 **D** ☐ Change ☒ Addition
6.2 NAME **Sasso, Patricia**
6.3 STREET ADDRESS **2207 NE 40th Av**
6.4 CITY-ST-ZIP **Ocala, FL 34470**

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, with all other like empowered.

SIGNATURE:

Aden J. Keele
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)

232486-90075-20
776137

NORTHEAST HOMEOWNERS ASSOCIATION 1999 BOARD - (DIRECTORS)

D
Frank Bile
3725 NE 18th Av
Ocala, Fl 34479

D
Kay Funina
3725 NE 18th Av
Ocala, Fl 34479

D
Ellen Galipo
4340 NE 25th Av
Ocala, Fl 34479

D
Ron Kuiken
3425 NE 45th St
Ocala, Fl 34479

D
Lou Larosch
3080 NE 43rd Pl
Ocala, Fl 34479

D
Ruby Mautner
3150 NE 36th Av #166
Ocala, Fl 34479

D
Rubin Safier
2477 NE 46th Pl
Ocala, Fl 34479

D
Bob Whitehead
4621 NE 25th Av
Ocala, Fl 34479