

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 11 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # H00990 (2)  
1. Corporation Name  
TWIN LAKES RESIDENT OWNERS' ASSOCIATION, INC.



Principal Place of Business  
2419 GULF TO BAY  
LOT 1221  
CLEARWATER FL 34625  
US

Mailing Address  
2419 GULF TO BAY  
LOT 1221  
CLEARWATER FL 34625-4319  
US

3. Date Incorporated or Qualified  
04/02/1984

3a. Date of Last Report  
03/13/1996

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

4. FEI Number  
59-2412185

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

COMPORT, JAMES  
2419 GULF TO BAY BLVD.  
LOT 1424  
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name ROBICHAUD CLARENCE  
82 Street Address (P.O. Box Number is Not Acceptable)  
2419 Gulf to Bay  
83 Lot 211  
84 City Clearwater FL 85 Zip Code 34625

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *[Signature]*

2-4-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SP	1.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COMPORT, JAMES	1.2 NAME	GOITON, John
STREET ADDRESS	2419 GULF-TO-BAY, LOT 1424	1.3 STREET ADDRESS	2419 Gulf to Bay Lot 1315
CITY-ST-ZIP	CLEARWATER FL	1.4 CITY-ST-ZIP	Clearwater FL.
TITLE	T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBICHAUD, CLARENCE	2.2 NAME	
STREET ADDRESS	2419 GULF TO BAY, LOT 221	2.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34625	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATTECCI, JOAN	3.2 NAME	
STREET ADDRESS	2419 GULF TO BAY LOT 815	3.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPLONICK, JOHN	4.2 NAME	
STREET ADDRESS	2419 GULF-TO-BAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRUBER, RICHARD	5.2 NAME	REITER, JERRY
STREET ADDRESS	2419 GULF-TO-BAY, LOT #817	5.3 STREET ADDRESS	2419 Gulf to Bay Lot 728
CITY-ST-ZIP	CLEARWATER FL	5.4 CITY-ST-ZIP	Clearwater FL.
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RUPP, RICHARD	6.2 NAME	Marg Keller
STREET ADDRESS	2419 GULF- TO-BAY BLVD LOT #817	6.3 STREET ADDRESS	2419 Gulf to Bay 713
CITY-ST-ZIP	CLEARWATER FL	6.4 CITY-ST-ZIP	Clearwater FL.

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 20/97

Date Daytime Phone #

CR2E034 (9/96)