

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1-2

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H07210 (8)**

1. Corporation Name

REGENCY HEIGHTS HOMEOWNERS, INC.



Principal Place of Business

Mailing Address

**LLOYD VAN LENTE
LOT 356
CLEARWATER FL 34621
US**

**2550 STATE ROAD 580 EAST
CLEARWATER FL 34621
US**

3. Date Incorporated or Qualified 06/08/1984	3a. Date of Last Report 02/14/1995
4. FEI Number 59-2419534	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 **DORIS HERBERT**

26 **2550 STATE ROAD 580**

Suite, Apt #, etc

Suite, Apt #, etc.

22 **LOT # 491**

27 **LOT # 491**

City & State

City & State

23 **CLEARWATER FL**

28 **CLEARWATER FL**

24 **34621** 25 **USA**

29 **34621** 30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LLOYD VANLENTE
2550 SR 580E #356
CLEARWATER FL 34621**

81 Name DORIS HERBERT	85 Zip Code FL 34621
82 Street Address (P.O. Box Number is Not Acceptable) 2550 STATE ROAD 580	
83 LOT # 491	
84 City CLEARWATER	

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 *Doris E. Herbert*

6/7/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	VAN LENTE, LLOYD	
STREET ADDRESS	2550 STATE RD. 580	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	MEYER, MARGARET	
STREET ADDRESS	2550 STATE RD. 580	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	HERBERT, DORIS	
STREET ADDRESS	2550 S R 580 E #491	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	DOUBLE, BERNARD	
STREET ADDRESS	2550 STATE RD. 580	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BEAN, ARTHUR	
STREET ADDRESS	2550 SR 580E 279	
CITY - ST - ZIP	CLEARWATER FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KARHUT, HELEN	
STREET ADDRESS	2550 SR 580E #486	
CITY - ST - ZIP	CLEARWATER FL	

1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JOSEPH HUPPMAN	
1.3 STREET ADDRESS	2550 STATE ROAD 580 LOT # 372	
1.4 CITY - ST - ZIP	CLEARWATER FL 34621	
2.1 TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CHARLES RICKETTS	
2.3 STREET ADDRESS	2550 STATE ROAD 580 LOT # 259	
2.4 CITY - ST - ZIP	CLEARWATER FL 34621	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	300001860893	
3.3 STREET ADDRESS	-06/13/96--01015--013	
3.4 CITY - ST - ZIP	***200.00	
4.1 TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	ANSLEY CUMMINS	
4.3 STREET ADDRESS	2550 STATE ROAD 580 LOT # 293	
4.4 CITY - ST - ZIP	CLEARWATER FL 34621	
5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	ELEANOR GAYNOR	
5.3 STREET ADDRESS	2550 STATE ROAD 580 LOT # 438	
5.4 CITY - ST - ZIP	CLEARWATER FL 34621	
6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	CHARLES FREELAND	
6.3 STREET ADDRESS	2550 STATE ROAD 580 LOT # 267	
6.4 CITY - ST - ZIP	CLEARWATER FL 34621	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with an address.

SIGNATURE: *Ansley Cummins* Treasurer

4/30/96 813-797-6384

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

H07210

2-2

.....
PLEASE BE ADVISED THAT THERE IS 1
ADDITIONAL DIRECTOR FOR WHICH NO
ROOM IS ON YOUR FORM:

D

ROBERT CRAIG

2550 STATE ROAD 580 LOT # 266

CLEARWATER FL 34621