

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

FILED

May 08 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 # H25994 1. Corporation Name ACORN OAK CREST RESIDENTS, INC.					
Principal Place of Business Mailing Address 9925 ULMERTON RD. #180 LARGO, FL 33771-4227 US					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/17/1984	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		3a. Date of Last Report 2/8/1996	
22. City & State		27. City & State		4. FEI Number 59-2464778	
23. Zip		28. Zip		Applied For Not Applicable	
24. Country		29. 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	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent FORD, EDWIN I., P.A. 2307 WEST BAY DRIVE LARGO, FL 33770 US			10. Name and Address of New Registered Agent		
			b1. Name		
			b2. Street Address (P.O. Box Number is Not Acceptable)		
			b3.		
			b4. City		
			FL b5. Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____					
12. OFFICERS AND DIRECTORS					
1.1 TITLE ☒ DELETE					
NAME PPDD PALMER, MARYDEE					
1.2 STREET ADDRESS					
1.3 CITY - ST - ZIP					
1.4 CITY - ST - ZIP					
2.1 TITLE ☒ DELETE					
NAME VD LENNEY, PAUL					
2.2 STREET ADDRESS					
2.3 CITY - ST - ZIP					
2.4 CITY - ST - ZIP					
3.1 TITLE ☒ DELETE					
NAME PD GIUNTA, DORIS					
3.2 STREET ADDRESS					
3.3 CITY - ST - ZIP					
3.4 CITY - ST - ZIP					
4.1 TITLE ☒ DELETE					
NAME TD JOHNSON, KENNETH					
4.2 STREET ADDRESS					
4.3 CITY - ST - ZIP					
4.4 CITY - ST - ZIP					
5.1 TITLE ☐ DELETE					
NAME					
5.2 STREET ADDRESS					
5.3 CITY - ST - ZIP					
5.4 CITY - ST - ZIP					
6.1 TITLE ☐ DELETE					
NAME					
6.2 STREET ADDRESS					
6.3 CITY - ST - ZIP					
6.4 CITY - ST - ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE ☐ Change ☒ Addition					
NAME P/D CRUMB, ALBERT L.					
1.2 STREET ADDRESS 9925 ULMERTON RD. #180					
1.3 CITY - ST - ZIP LARGO, FL 33771-4227					
1.4 CITY - ST - ZIP ☒ Change ☐ Addition					
2.1 TITLE ☐ Change ☒ Addition					
NAME V/D GIUNTA, DORIS					
2.2 STREET ADDRESS 9925 ULMERTON RD. #253					
2.3 CITY - ST - ZIP LARGO, FL 33771-4227					
2.4 CITY - ST - ZIP ☐ Change ☒ Addition					
3.1 TITLE ☐ Change ☒ Addition					
NAME S/D MacLEAN, FRANCES					
3.2 STREET ADDRESS 9925 ULMERTON RD. #176					
3.3 CITY - ST - ZIP LARGO, FL 33771-4227					
3.4 CITY - ST - ZIP ☐ Change ☒ Addition					
4.1 TITLE ☐ Change ☐ Addition					
NAME T/D LEVIS, MURRAY					
4.2 STREET ADDRESS 9925 ULMERTON RD. #513					
4.3 CITY - ST - ZIP LARGO, FL 33771-4227					
4.4 CITY - ST - ZIP ☐ Change ☐ Addition					
5.1 TITLE ☐ Change ☐ Addition					
NAME					
5.2 STREET ADDRESS					
5.3 CITY - ST - ZIP					
5.4 CITY - ST - ZIP					
6.1 TITLE ☐ Change ☐ Addition					
NAME					
6.2 STREET ADDRESS					
6.3 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					
ALBERT L. CRUMB P/D					
SIGNATURE: <i>Albert L. Crumb</i>					
Date 5/3/97 (813) 584-5508					

CR2E034 (9/96)