

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

**FILED**

**Mar 31 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # H58326 (0)**  
 1. Corporation Name  
**MARY LU HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business <b>C/O MURRAY E. YOUNG 24437 HARBORVIEW RD. BOX 222 CHARLOTTE HARBOR FL 33980</b>	Mailing Address <b>C/O MURRAY E. YOUNG 24437 HARBORVIEW RD. BOX 222 CHARLOTTE HARBOR FL 33980</b>
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DO NOT WRITE IN THIS SPACE

<b>21</b> 2. Principal Place of Business	<b>26</b> 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>22</b> 22 City & State	<b>27</b> 27 City & State
<b>23</b> 23 Zip	<b>28</b> 28 Country
<b>24</b> 24 Country	<b>30</b> 30 Country

<b>3.</b> Date Incorporated or Qualified <b>05/22/1985</b>	
<b>4.</b> FEI Number <b>59-2593151</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**  
**YOUNG, MURRAY E.  
24437 HARBORVIEW RD. BOX 222  
CHARLOTTE HARBOR FL 33980**

**10. Name and Address of New Registered Agent**

<b>81</b> Name <b>MARGERY SANBORN</b>	
<b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>24437 HARBORVIEW RD. BOX 72</b>	
<b>83</b>	
<b>84</b> City <b>CHARLOTTE HARBOR, FL</b>	<b>85</b> Zip Code <b>33980</b>

**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 **MARGERY SANBORN** *Margery Sanborn* **March 26, 1998**  
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	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>SEKELY, BETTY</b>
STREET ADDRESS	<b>24437 HARBORVIEW RD BOX 37</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>PRIMEAU, GERALD</b>
STREET ADDRESS	<b>24437 HARBORVIEW RD BOX 103</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>CLARKE, JOAN O</b>
STREET ADDRESS	<b>24437 HARBORVIEW RD BOX 72</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>MYERS, ELLEN</b>
STREET ADDRESS	<b>24437 HARBORVIEW RD BOX 73</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL</b>
TITLE	<b>C</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>ARMBRICHT, ARNOLD</b>
STREET ADDRESS	<b>24437 HARBORVIEW RD BOX 45</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL</b>
TITLE	<b>P</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>HILL, JESSE</b>
STREET ADDRESS	<b>24437 HARBORVIEW RD #96</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL</b>

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>1.1</b> TITLE	<b>P</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>1.2</b> NAME	<b>ARNOLD E. ARMBRICHT</b>
<b>1.3</b> STREET ADDRESS	<b>24437 HARBORVIEW RD. LOT 45</b>
<b>1.4</b> CITY-ST-ZIP	<b>CHARLOTTE HARBOR, FL. 33980</b>
<b>2.1</b> TITLE	<b>VP</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>2.2</b> NAME	<b>RAYMOND GROSS</b>
<b>2.3</b> STREET ADDRESS	<b>24437 HARBORVIEW RD. LOT 53</b>
<b>2.4</b> CITY-ST-ZIP	<b>CHARLOTTE HARBOR, FL. 33980</b>
<b>3.1</b> TITLE	<b>S</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>3.2</b> NAME	<b>MARGERY SANBORN</b>
<b>3.3</b> STREET ADDRESS	<b>24437 HARBORVIEW RD. LOT 72</b>
<b>3.4</b> CITY-ST-ZIP	<b>CHARLOTTE HARBOR, FL. 33980</b>
<b>4.1</b> TITLE	<b>T</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>4.2</b> NAME	<b>ELINOR MEYERS</b>
<b>4.3</b> STREET ADDRESS	<b>24437 HARBORVIEW RD. LOT 95</b>
<b>4.4</b> CITY-ST-ZIP	<b>CHARLOTTE HARBOR, FL. 33980</b>
<b>5.1</b> TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>5.2</b> NAME	<b>CHARLES E. CARROLL</b>
<b>5.3</b> STREET ADDRESS	<b>24437 HARBORVIEW RD. LOT 90</b>
<b>5.4</b> CITY-ST-ZIP	<b>CHARLOTTE HARBOR, FL. 33980</b>
<b>6.1</b> TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>6.2</b> NAME	<b>GEORGE V. MEYERS</b>
<b>6.3</b> STREET ADDRESS	<b>24437 HARBORVIEW RD. LOT 95</b>
<b>6.4</b> CITY-ST-ZIP	<b>CHARLOTTE HARBOR, FL. 33980</b>

**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.

SIGNATURE *Margery Sanborn* **March 26, 1998**

CFR2E034 (10/97)

**MARY LU HOMEOWNERS  
ASSOCIATION, INC.**

*24437 Harborview Road, Box 222  
Charlotte Harbor, Florida 33980*

ADDITIONAL DIRECTORS ELECTED AT MARCH 10th 1998 ANNUAL MEETING

D  
TYS MURRE  
24437 HARBORVIEW RD. LOT 14  
CHARLOTTE HARBOR, FL. 33980

D  
BEVERLY FRY  
24437 HARBORVIEW RD LOT 67  
CHARLOTTE HARBOR, FL. 33980

*Margery Sanborn* 9-26-98  
MARGERIE SANBORN SECRETARY