

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90251 036 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # H58326

1. Corporation Name
MARY LU HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
 C/O MURRAY E. YOUNG C/O MURRAY E. YOUNG
 24437 HARBORVIEW RD. BOX 222 24437 HARBORVIEW RD. BOX 222
 CHARLOTTE HARBOR FL 33980 CHARLOTTE HARBOR FL 33980

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/22/1985

2. Principal Place of Business 2a. Mailing Address
 21 26

4. FEI Number Applied For
59-2593151 Not Applicable

Suite, Apt. #, etc. 27

5. Certificate of Status Desired **\$8.75** Additional Fee Required

City & State 28

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

Zip Country 29 30

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
SANBORN, MARGERY
24437 HARBORVIEW RD BOX 72
CHARLOTTE HARBOR FL 33980

10. Name and Address of New Registered Agent
 81 Name **GOSSETT, FRANCES M.**
 82 Street Address (P.O. Box Number is Not Acceptable)
24437 Harborview Road, Box 222
 83
 84 City **Charlotte Harbor** FL 85 Zip Code **33980**

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 *FRANCES M. GOSSETT* *Frances M. Gossett* **4-10-99**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARMBRIGHT, ARNOLD E	1.2 NAME	P
STREET ADDRESS	24437 HARBORVIEW RD LOT 45	1.3 STREET ADDRESS	CLARKE, JOAN O.
CITY-ST-ZIP	CHARLOTTE HARBOR FL 33980	1.4 CITY-ST-ZIP	24437 Harborview Rd. Lot 20
TITLE	VP <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GROSS, RAYMOND	2.2 NAME	VP
STREET ADDRESS	24437 HARBORVIEW RD LOT 53	2.3 STREET ADDRESS	SEKELY, BETTY
CITY-ST-ZIP	CHARLOTTE HARBOR FL 33980	2.4 CITY-ST-ZIP	24437 Harborview RD., Lot 37
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANBORN, MARGERY	3.2 NAME	
STREET ADDRESS	24437 HARBORVIEW RD LOT 72	3.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE HARBOR FL 33980	3.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEYERS, ELINOR	4.2 NAME	T
STREET ADDRESS	24437 HARBORVIEW RD LOT 95	4.3 STREET ADDRESS	GOSSETT, FRANCES M.
CITY-ST-ZIP	CHARLOTTE HARBOR FL 33980	4.4 CITY-ST-ZIP	24437 Harborview Rd., Lot 84
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARROLL, CHARLES E	5.2 NAME	D
STREET ADDRESS	24437 HARBORVIEW RD LOT 90	5.3 STREET ADDRESS	GENTILE, MICHAEL
CITY-ST-ZIP	CHARLOTTE HARBOR FL 33980	5.4 CITY-ST-ZIP	24437 Harborview Rd., Lot 55
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEYERS, GEORGE V	6.2 NAME	
STREET ADDRESS	24437 HARBORVIEW RD LOT 95	6.3 STREET ADDRESS	
CITY-ST-ZIP	CHARLOTTE HARBOR FL 33980	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, with all other like empowered.

SIGNATURE: *Frances M. Gossett* **4-10-99** **941-625-2395**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

538368-90251-34
H58326

MARY LU HOMEOWNERS ASSOCIATION, INC.

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ADDITIONAL DIRECTORS ELECTED AT MARCH 9, 1999 ANNUAL MEETING:

D
SANBORN, LEONARD
24437 Harborview Rd., Lot 72
Charlotte Harbor, FL 33980

D
TERRINONI, TERRY
24437 Harborview Rd., Lot 62
Charlotte Harbor, FL 33980

D (no longer VP)
GROSS, RAYMOND
24437 Harborview Rd., Lot 53
Charlotte Harbor, FL 33980