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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H84929

Principal Place of Business

604 HILLSBOROUGH STREET

PALM HARBOR FL

PALM HARBOR FL

604 HILLSBOROUGH ST

AYERS, JAMES

STREEL ADDRESS

STREET ADDRESS

C(TY - \$1 - 78)

TITLE

NAMÉ

Mailing Address

WALL SPRINGS MOBILE HOME PARK HOMEOWNER'S ASSOCI

604 HILLSBOROUGH STREET 604 HILLSBOROUGH STREET PALM HARBOR FL 34683-8631 **PALM HARBOR FL 34683-1639** 3. Date Incorporated or Qualified 3a. Date of Last Report 11/13/1985 03/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2605743 21 26 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zin Country Zip This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SMITH, WANDA 604 HILLSBOROUGH STREET, LOT #11 Street Address (P.O. Box Number is Not Acceptable) 82 PALM HARBOR FL 34683 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.05/02 and 607.15/08. 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 05/05, Florida Statutes. SIGNATURE Signature, typing or proceed notice of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. President X DELETE 6 TITLE 11 TITLE Change Addition Marion Aialie SPOONER, JOLIANE 1.2 NAME NAME 604 Hillsborough St 604 HILLSBORUGH STREET STREET ADDRESS 13 STREET ADDRESS Palm Harbor, F1. PALM HARBOR FL 1.4 CITY-ST-ZIP CITY-ST-7-P X DELETE Vice President Change Addition TITLE 21 TITLE **BOWMAN, WILLIAM** 2.2 NAME NAME Lee Howard 604 HILLSBOROUGH ST STREET ADORESS 2.3 STREET ADDRESS 604 Hillsborough St. PALM HARBOR FL Palm Harbor, F1. Secretary CHY-ST ZIP 2. 4 CITY - ST - ZIP **A** DELETE 3.1 TITLE TITLE Charles Hooper CUCCIO, PAULINE NAME 3.2 NAME 604 Hillsborough St 604 HILLSBOROUGH ST STREET ADORESS 3.3 STREET ADDRESS PALM HARBOR FL Palm Harbor, F1. 3.4. CITY-ST-ZIP CITY - ST- ZIP DELETE Addition 4.1 TITLE Charlene Meade Treasurer Change THILE SMITH, WANDA 4. 2 NAME NAME 604 Hillsborough St. 604 HILLSBOROUGH ST., LOT 11 4.3 STREET ADDRESS STREET ADDRESS Palm Harbor, F1. PALM HARBOR FL. 4.4 CITY-ST-ZIP CITY-ST-7/P DELETE Director Change Addition 5.1 TITLE TIME Patrick Mc Bride NEWTON, GARRY 5.2 NAME NAM:

FILED Mar 07 1997 8:00am Secretary of State

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i). Plorius 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

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

604 Hillsborough St.

604 Hillsborough St.

Director

Ralph Garn

Palm Harbor, F1. 34683

Change

Addition

2/36/97 Daytme Prone