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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

H84929

(9)

WALL SPRINGS MOBILE HOME PARK HOMEOWNER'S ASSOCI ATION, INC.

Principal Place of Business

Mailing Address

604 HILLSBOROUGH STREET

604 HILLSBOROUGH STREET

FILED Mar 06 1996 8:00am Secretary of State



PALM HARBOR FL 34683-8631				PALM HARBOR FL 34883-8631										
										Date Incorporated or Qualifi 11/13/1985		te of La: 03/30	st Report /1995	
2. Principal Place of Business				28.	2a. Mailing Address				4.	FEI Number			Applied For	
21				26						59-2605743			Not Applicable	8
Sulte, Apt. #, etc.				27	Suite, Apt. #, etc.			5.	Certificate of Status Desired	· 🗅	-	.75 Additional se Required		
City & State				City & State				6.	Election Campalgn Financin	9 _	\$:	5.00 May Be		
23			28						Trust Fund Contribution	<u> </u>		dded to Fees		
	Zip Country			ļ_,	Zip> Country				8.	This corporation has liability	for intangible	tax und	ers 199.032,	
24			25	29		30	···-				Yes No	· k		
		9, Name	and Address of Cur	rent Hegis	stered Agent		81	Name	10.	Name and Address of Ne	w Registered	Agent		
	********						01	Name						
SMITH, WANDA							82	Street /	Address (P	P.O. Box Number is Not Acce	ptable)			
604 HILLSBOROUGH STREET, LOT #11				F11			-			· · · · · · · · · · · · · · · · · · ·				
	PALM HA	arbor fl	. 34683				83							
							84	City	-			85	Zip Code	
											Fi			
	or registered	d saent, or l	both, in the State of F	lorida. Sud	07.1508, Florida Statu Hi change was authori .0505, Florida Statute	ized by the c	corpo	named co oration's	rporation a board of d	submits this statement for the firectors. I hereby accept the	e purpose of ol appointment a	nanging is regist	its registered officered agent. I am	ce
SIG	NATURE _	local en band o	printed name of registered a	nead and title of	arduable (h	OTE: Registered	Anen	n an dennis t	on Head when s	reloctation)	DATE		<u>.</u>	_
12.		-greaters, system t	OFFICERS	 _		13.	7 400	i ugi acaro i		ADDITIONS/CHANGES TO		D DIRE	CTORS IN 12	_
TITLE		P			Z DELETE	1.11	ITLE		Pani	94N7		Cha		ī
NAME		HOWE.	ROBERT		•	1.2 N	AME			ANE SPEONE	4.			
STREET ADDRESS 604 HILLSBOROUGH ST.				1.3 STREET			ADDRESS	Lak	HILLS BOROUS	78 11				
	-ST-ZIP	PALM F	KARBOR FL					T-ZIP		M HALBOR, F		49.7		
TITLE		V			G DELETE	2.11				Para		Cha	nge 🔲 Addition	
HAME	.	DUCKE	R, GEORGE		* -	2.2 N	AME		4.514	I MAN TONE	دم			
STREE	STREET ADDRESS 604 HILLSBOROUGH ST				2.3 5			ADDRESS	604	HILLS BOLDOG	# ST			
	-ST-ZIP	PALM I	IARBOR FL			2.4 C	ITY - S	T-ZIP		n Hariban Fi		73		
TITLE		\$			DELETE	3.17	_		340	•		☐ Cha	nge 🔲 Addition	1
NAME		SAGE.	Martha J.		•	3.2 N	AME			Time Cuccio				
STREE	ET ADDRESS	604 HII	LSBOROUGH ST			3.3. 8	TREET	T ADDRESS	404	4 HILLS BOLOU	44			
CITY-	-ST-ZIP	PALM I	HARBOR FL			340	ITY-S	ST-ZIP		m HALDOR		۽ ولي	>	
TITLE		D		····	☐ DELETE	4 1 1						Cha		1
NAME	. I	SMITH,	WANDA			4.2 N	AME			•				
STREE	ET ADDRESS	604 HII	LISBOROUGH ST.	, LOT 11		4.3 \$	TREET	ADDRESS						
спу-	-ST-ZIP	PALM I	Harbor FL			4.4 0	ITY-S	ST-ZIP						
TITLE		D			DELETE	5. 1 7	ITLE		Z. D			☐ Cha	inge 🔲 Addition	1
NAME	E	HUNT,	BERESFORD		•	5.2 N	AME			ALL CLANSTON	_			
STRE	ET ADDRESS	604 HII	LLSBOROUGH ST.	, LOT 27		5.3 \$	IREET	ADDRESS	4	HILLS DOCLOUG	7CH			
CITY	-ST-ZIP	PALM I	HARBOR FL			5.4 C	(TY - S	ST-ZIP	Paul	m HARRY F	- 6 34K	83		
TITLE		D			DELETE	6.11	ITLE					Cha	inge 🔲 Addition	1
NAME	E	SCHER	EF, MAURICE			6.2 N	AME		JAN	res 14yers				
STRE	ET ADDRESS	604 HII	LLSBOROUGH ST			6.3 S	TREET	ADDRESS	404	1 17 irro Borock	M DI			
CITY-	-ST-ZIP	PALM I	HARBOR FL			6.4 0	ITY-S	ST - ZIP	PALM	1 HALPOOL FL	- 346	63		

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)(k), 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 12 or Block 12 or na an attachment with an address.