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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # J86663

1. Corporation Name

LARGO I.I.T.S. HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**1001 STARKEY ROAD
LOT 58A
LARGO FL 34641
US**

Mailing Address

**1001 STARKEY RD
LOT 58A
LARGO FL 34641
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1987

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERNSTEIN, DAVID S
150 2ND AVE N
ST PETERSBURG FL 33701**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

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

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** ☐ DELETE
NAME **JEAN MARINARO**
STREET ADDRESS **1001 STARKEY RD 801**
CITY-ST-ZIP **LARGO FL 33771**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **V** ☒ DELETE
NAME **HUGHES, DARWIN**
STREET ADDRESS **1001 STARKEY RD 636**
CITY-ST-ZIP **LARGO FL**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **T** ☐ DELETE
NAME **BARBARA CURTIN**
STREET ADDRESS **1001 STARKEY RD. #754**
CITY-ST-ZIP **LARGO FL 33771**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **S** ☐ DELETE
NAME **FERGUSON, DORCAS**
STREET ADDRESS **1001 STARKEY RD 234**
CITY-ST-ZIP **LARGO FL**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **D** ☐ DELETE
NAME **RUTH PARKER**
STREET ADDRESS **1001 STARKEY RD #130**
CITY-ST-ZIP **LARGO FL 33771**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **D** ☒ DELETE
NAME **MEHL, PAUL**
STREET ADDRESS **1001 STARKEY RD 587**
CITY-ST-ZIP **LARGO FL**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

**V JACK READING
1001 STARKEY RD #422
LARGO FL 33771**

**D MARY MCGING
1001 STARKEY RD #714
LARGO FL 33771**

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:

Barbara Curtin Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/8/99

727/535-0105

CR2E034 (11/98)