

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

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95 APR 27 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # M93482

(1)

1. Corporation Name

WEST PUTNAM LAKES, INC.

Principal Place of Business

C/O HENRY M. FRAZEE
409 S.W. 4TH AVE
GAINESVILLE FL 32601

Mailing Address

C/O HENRY M. FRAZEE
409 S.W. 4TH AVE
GAINESVILLE FL 32601

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
08/09/1988

3a. Date of Last Report
02/09/1994

4. FEI Number
59-2907800

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 HENRY M. FRAZEE

Suite, Apt. #, etc.

22 115 TURKEY CREEK

City & State

23 ALACHUA, FL

Zip

24 32615

Country

25 ALACHUA

2a. Mailing Address

26 HENRY M. FRAZEE

Suite, Apt. #, etc.

27 115 TURKEY CREEK

City & State

28 ALACHUA, FL

Zip

29 32615

Country

30 ALACHUA

9. Name and Address of Current Registered Agent

FRAZEE, HENRY M.
409 S.W. 4TH AVE
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name
JOHN S. BALL, ESQUIRE

82 Street Address (P.O. Box Number is Not Acceptable)
FISHER, TOUSEY, LEAS & BALL

83 1 INDEPENDENT DRIVE, SUITE 2600

84 City
JACKSONVILLE

FL

85 Zip Code
32202

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

John S. Ball

(NOTE: Registered Agent signature required when registering)

4/18/95
DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
ANDERSON, NANCY W.
7940 LITTLE FOX LANE
JACKSONVILLE FL

2. TITLE
NAME
STREET ADDRESS
CITY ST ZIP
PD
FRAZEE, HENRY M.
409 SW 4TH AVE
GAINESVILLE FL

3. TITLE
NAME
STREET ADDRESS
CITY ST ZIP
VD
WILLIAMS, D.E. SR
409 SW 4TH AVE
GAINESVILLE FL

4. TITLE
NAME
STREET ADDRESS
CITY ST ZIP
STD
WILLIAMS, D.E. JR.
5150 CENTRAL AVE
ST. PETERSBURG FL

5. TITLE
NAME
STREET ADDRESS
CITY ST ZIP

6. TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP
STD
NANCY DEE WILLIAMS ANDERSON
POST OFFICE BOX 551153
JACKSONVILLE, FL 32255

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP
PD
HENRY M. FRAZEE
115 TURKEY CREEK
ALACHUA, FL 32615

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP
Deceased
Delete

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP
VDP
DAVID EVAN WILLIAMS, JR.
5150 CENTRAL AVENUE
ST. PETERSBURG, FL 33707

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information submitted on this annual report or biennial 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 person or persons 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 affidavit with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

HENRY M. FRAZEE

4-20-95

904-462-2206