FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N00269

(3)

Mailing Address

GEORGE'S LIGHTHOUSE POINT HOMEOWNERS ASSOCIATION , INC.

230 JOHN KNOX ROAD, SUITE 2 230 JOHN KNOX ROAD, SUITE 2 TALLAHASSEE FL 32303 TALLAHASSEE FL 32303-6635 3. Date Incorporated or Qualified 12/09/1983 04/04/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 59-2530607 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees ZiD Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DRAKE, VAN 82 Street Address (P.O. Box Number is Not Acceptable) 230 JOHN KNOX RD., SUITE 2 83 TALLAHASSEE FL 32303 84 City Zip Code Statutes, the above-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered by 3, Florida Statutes. Pursuant to the provisions of Sections 617.0502 and 617.1508, Flordat
office or registered age of both, in the State of Floridat Such change
agent. I am familiar with 1119 accounts e obligations of, Section 617.050 SIGNATURE Signature, typed or printed name of registered agent and title if app (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 96/6) DELETE THILE PD 1.1 TITLE Change Addition DRAKE, VAN NAME 1.2 NAME 230 JOHN KNOX RD STE 2 STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIF 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition GODBY, JACK NAME 2.2 NAME P.O. BOX 723 N/A STREET ADDRESS 2.3 STREET ADDRESS MOULTRIE GA CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE STD 3.1 TITLE Change Addition DRAKE, VAN NAME 3.2 NAME 230 JOHN KNOX RD STREET ADDRESS 3.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4.2 NAME

14. I do 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if or 13 god, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

5.4 DITY - ST - 7IP

4.4 City-St-ZiP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

DITY-ST-ZIP

CITY-ST-ZIP

CITY - \$1-2IP

TITLE

NAME

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

4/1/97

Daytime Phone # 0007869

Addition

Addition

FILED

Apr 07 1997 8:00am

Secretary of State