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May 19 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N00440 (0)

1. Corporation Name

ANDOVER F OF KINGS POINT CONDOMINIUM ASSOCIATION
, INC.

Principal Place of Business

Mailing Address

1904 CLUBHOUSE DRIVE
SUN CITY CENTER FL 33573-4351

1904 CLUBHOUSE DRIVE
SUN CITY CENTER FL 33573-5912



3. Date Incorporated or Qualified
12/16/1983

3a. Date of Last Report
04/30/1996

4. FEI Number
59-2138319

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENE, ROBERT E.
FLORIDA LIFESYCLE MANAGEMENT
1904 CLUBHOUSE DRIVE
SUN CITY CENTER FL 33573

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 617.0502 and 617.1508, 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 617.0503, 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 D ☒ DELETE
NAME MCINTYRE, ANN
STREET ADDRESS 301 KINGS BLVD #136
CITY-ST-ZIP SUN CITY CENTER FL

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

TITLE TD ☐ DELETE
NAME FREY, VIRGINIA
STREET ADDRESS 301 KINGS BLVD., #F128
CITY-ST-ZIP SUN CITY CENTER FL 33573

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

TITLE SD ☐ DELETE
NAME MAY, ROSE
STREET ADDRESS 301 KINGS BLVD., #125
CITY-ST-ZIP SUN CITY CENTER FL

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PD ☐ DELETE
NAME EISHAUER, HEINZ
STREET ADDRESS 301 KINGS BLVD #129
CITY-ST-ZIP SUN CITY CENTER FL

4.1 TITLE VD ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VD ☐ DELETE
NAME HARPER, FLORENCE
STREET ADDRESS 301 KINGS BLVD #128
CITY-ST-ZIP SUN CITY CENTER FL

5.1 TITLE PD ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE SD ☒ Change ☐ Addition
6.2 NAME BRACY, ELIZABETH
6.3 STREET ADDRESS 301 KINGS BLVD., F127
6.4 CITY-ST-ZIP SUN CITY CENTER, FL 33573

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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Florence V. Harper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
FLORENCE V. HARPER 5/19/97

CR2E037 (9/96)