

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N00811** (2)
1. Corporation Name

OSPREY CREEK HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: P.O. BOX 55, PALM CITY FL 34990
Mailing Address: P.O. BOX 55, PALM CITY FL 34990

3. Date Incorporated or Qualified: **01/09/1984**
3a. Date of Last Report: **07/31/1995**

2. Principal Place of Business: 21 **7136 SE OSPREY STREET**
22 Suite, Apt. #, etc.
23 City & State: **HOBE SOUND, FL**
24 Zip: **33455**
25 Country: **USA**
26 Mailing Address: **7136 SE OSPREY STREET**
27 Suite, Apt. #, etc.
28 City & State: **HOBE SOUND, FL**
29 Zip: **33455**
30 Country: **USA**

4. FEI Number: **59-2382041**
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCGUIRE, ANDREW E
3934 SW OSPREY CREEK WAY
PALM CITY FL 3499

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DOWNING, GEO	
STREET ADDRESS	4154 SW OSPREY CREEK WAY	
CITY-ST-ZIP	PALM CITY FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	CIAFFONE, ROSE	
STREET ADDRESS	3884 SW OSPREY CREEK WAY	
CITY-ST-ZIP	PALM CITY FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	TOWLESS, JANIS	
STREET ADDRESS	3994 SW OSPREY CREEK WAY	
CITY-ST-ZIP	PALM CITY FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	MCGUIRE, ANDREW	
STREET ADDRESS	3934 SW OSPREY CREEK WAY	
CITY-ST-ZIP	PALM CITY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4-3-96** File No: **407-220-0429**

CR2E037 (12/95)