1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N04182

1. Corporation Name

EVANS ACRES PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business FURLONG, JACQUELINE 15190 ANGUS RD POLK CITY FL 33868

2. Principal Place of Business

15380 Ango

Stevens,

Suite, Apt. #, etc.

Mailing Address

FURLONG. JACQUELINE 15190 ANGUS RD POLK CITY FL 33868

2a. Mailing Address

Stevens

Suite, Apt. #, etc.

FILED

05-01-1999 90032 018 ****61.25

May 01, 1999 8:00 am § Secretary of State

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

07/13/1984

59-2955342

4. FEI Number

9. Name and Address of Current Registered Agent FURLONG, JACQUELINE 15190 ANGUS RD POLK CITY FL 33868 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Fiorida Statutes, the above-named corporation submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, agent, lam familiar supply and accept the publication of Section 617,0502, Fiorida Statutes, the above-named corporation submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Fiorida, Such change was authorized by the corporation's board of directors. In the purpose of changing its registered agent, or both, in the State of Fiorida, Such change was authorized by the corporation's board of directors. In the publication agent, ag	^{ZIP}	COUR		7 P	Comin		6. Election Car	mpaign Financi	^{ng} □	\$5.00 N	
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15 15 25 25 25 25 25 25	EUD! ANG	A CAUCINE				1	Stevens	ŝ. L.	indy L	<u></u>	<u> </u>
POLK CITY FL 33868 11. Furrounant to the provisions of Sections 817.0502 and 817.1508. Florida Statutes, the above-named corporation's busined his statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the applications of Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the polipionisment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the provision mental and accept the polipionism of Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME MEADOR, RON 12. NAME MEADOR, RON 13. STREET ADDRESS STREET ADDRESS STREAT									eptable)		
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CHIT-OF-ZIF											,
		ertify that the informa	tion supplied with this	filing does not qualify f			Section 119.07(3)(i)	Florida Statut	es. I further cen	ify that the in	formation

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, with all other like empowered.

SIGNATURE:

Applied For

Fee Required

Not Applicable \$8.75 Additional