NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N06318

(2)

COUNTRY LANE HOMEOWNERS ASSOCIATION, INC.							
Principal Place of Business Mailing Address					· ···-	T JADRIPHY BYN OBSID DINGA YNDY NADY ABSY DIDIY BYDY DYDYR BYDYN DYDYY ARBY	
1586 LAWNDALE CIRCLE 1588 LAWNDAL P.O. BOX 503 P.O. BOX 503 GOLDENROD FL 32733 GOLDENROD F			13				
						3. Date Incorporated or Qualified 3a. Date of Last Report 04/13/1995	
2. Principal Pla 21	ice of Business	2a. Mailing Address 26				4. FEI Number Applied For NOT APPLICABLE Not Applicable	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip Co. 29 30		intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent	
					81 Name		
PRESTON, MICHAEL 1586 LAWNDALE CIRCLE			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)		
	PARK FL 32792			В3			
				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 INOTE: Registered Agent signature required when reinstating) DATE DATE							
12.	OFFICERS AN		13.		- It dig the total	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ī	DELETE	1,1 T	TLE	· · · · · · · · · · · · · · · · · · ·	Change Middition	
NAME	LITTLE, SUSAN M	_	1.2 N	AMF		Want Holaday	
STREET ADDRESS	1578 LAWNDALE CIRCLE				T ADDRESS	1507 Laundale Elreie	
CITY-ST-ZIP	WINTER PARK FL				ST-ZIP	Winter Park, FL 32792	
TITLE	D	DELETE	2.1 T			Change Baddition	
NAME	SPEARS, MAGGIE	~	22 N			Rotanne Macgillivray	
STREET ADDRESS	1552 LAWNDALE CIRCLE				T ADDRESS	1656 Laundale Circle	
	WINTER PARK FL				ST-ZIP	Winter Park FL 32792	
CITY-ST-ZIP TITLE	S	DELETE	3.1 T		31 211	Change Addition	
NAME	MASSA, JERRY		3.2 N		-	Jack Deacon, o	
STREET ADDRESS	1468 AUBURN GREEN LOOP	,			T ADDRESS	1580 Laurdale Circle	
CITY-ST-ZIP	WINTER PARK FL				ST-ZIP	Winter Park FL 32792	
TITLE	D	15 PELETE	4.1 7			Change Addition	
NAME	MC LEOD, BILL	, •	4. 2 3				
STREET ADDRESS	1632 LAWNDALE CIRCLE		4.3 \$	TREE	T ADDRESS	Bill he Lead 1632 Lawndale Circle Winter Park, FL 32792	
CITY-ST-ZIP	WINTER PARK FL				ST-ZIP	WinterPark, FL 32792	
TITLE	PD	S OELETE	5.1 T	ITLE		Change Addition	
NAME	JOHNSON, JOSEPH		521	IAME	1		
STREET ADDRESS	1614 LAWNDALE CIR		535	TREE	T ADDRESS		
CITY-ST-ZIP	WINTER PARK FL				ST-ZIP		
TITLE	VP	X DELETE	6.1 T			☐ Change ☐ Addition	
NAME	YOUNG, DAWN	~		IAME	1		
STREET ADDRESS	1593 LAWNDALE CIRCLE				T ADDRESS		
CITY-ST-ZIP	WINTER PARK FL				ST-ZIP		
14 Ldo bereb	w certify that the information supplied	with this filing is voluntarily fu	rnished and	doe	es not quali	lify 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:

SUS OF THE STATE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR -14410

CR2E037 (12/95)