FILE NOW: FILING FEE IS $61.25

FILED
Apr 14 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 # N07835 (4)

1. Corporation Name

TROPICAL HARBOR MOBILE HOMEOWNERS ASSOCIATION, I NC.

Principal Place of Business	Mailing Address
% ~~BUTTS, L. WILLIAM~~ O'BRYAN, THOMAS F. ~~328 3RD AVENUE~~ 197 10TH ST LAKE PLACID FL 33852 US	% ~~BUTTS, L. WILLIAM~~ O'BRYAN, THOMAS F ~~328 3RD AVENUE~~ 197 10TH ST. LAKE PLACID FL 33852-8202 US

3. Date Incorporated or Qualified	02/26/1985
3a. Date of Last Report	03/07/1996
4. FEI Number	59-2522188 ☐ 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	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
COLLING, LEE JAY 20 N. ORANGE AVE, SUITE 700 ORLANDO FL 32801	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	PD	☒ DELETE	1.1 TITLE	President - Director	☒ Change ☐ Addition
NAME	TOUSEY, WILLIAM		1.2 NAME	William Myers	
STREET ADDRESS	233 6TH STREET		1.3 STREET ADDRESS	148 8th Street	
CITY-ST-ZIP	LAKE PLACID FL		1.4 CITY-ST-ZIP	Lake Placid, FL. 33852	
TITLE	VD	☒ DELETE	2.1 TITLE	Vice President - Director	☒ Change ☐ Addition
NAME	TOUSEY, WILLIAM		2.2 NAME	John Fitch	
STREET ADDRESS	233 6TH ST		2.3 STREET ADDRESS	4th Street	
CITY-ST-ZIP	LAKE PLACID FL		2.4 CITY-ST-ZIP	Lake Placid, FL. 33852	
TITLE	TD	☒ DELETE	3.1 TITLE	Treasurer - Director	☒ Change ☐ Addition
NAME	BUTTS, LEWIS		3.2 NAME	Thomas F. O'Bryan	
STREET ADDRESS	328 3RD AVE		3.3 STREET ADDRESS	197 10th Street	
CITY-ST-ZIP	LAKE PLACID FL		3.4 CITY-ST-ZIP	Lake Placid, FL, 33852	
TITLE	SD	☐ DELETE	4.1 TITLE	Membership - Director	☐ Change ☒ Addition
NAME	BIERSTINE, DORIS		4.2 NAME	James Gibbs	
STREET ADDRESS	306 12TH STREET		4.3 STREET ADDRESS	332 3rd Avenue	
CITY-ST-ZIP	LAKE PLACID FL		4.4 CITY-ST-ZIP	Lake Placid FL 33852	
TITLE	D	☒ DELETE	5.1 TITLE	Director	☒ Change ☐ Addition
NAME	GRENIER, AL		5.2 NAME	Al Beyer	
STREET ADDRESS	323 4TH AVE		5.3 STREET ADDRESS	344 4th Avenue	
CITY-ST-ZIP	LAKE PLACID FL		5.4 CITY-ST-ZIP	Lake Placid FL. 33852	
TITLE	SD	☒ DELETE	6.1 TITLE	Director	☒ Change ☐ Addition
NAME	MCKINNEY, IMOGENE		6.2 NAME	Lawrence Hathaway	
STREET ADDRESS	241 6TH STREET		6.3 STREET ADDRESS	350 - 2nd Avenue	
CITY-ST-ZIP	LAKE PLACID FL		6.4 CITY-ST-ZIP	Lake Placid FL. 33852	

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: [illegible] Thomas F. O'Bryan [illegible]

CR2E037 (9/96)