## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N09858

(4)

1. Corporation Name											
COLONIAL COLONY NORTH HOMEOWNERS ASSOCIATION, IN C.											
Principal Place of Business Mailing Address											
C/O JEAN V. REYNAERTS 899 E COLOMAL CIR DAYTONA BEACH FL 32117 US					C/O JEAN V. REYNARTS 899 E. COLONAL CIR. DAYTONA BEACH FL 32117 US					3. Date Incorporated or Qualified  06/19/1985  4. FE! Number Applied For  59-2518103 Not Applicable	
2. Principal P	ace of Busi	ness		2a. Mailing Address						5. Certificate of Status Desired Section 5. Section 5. Certificate of Status Desired Fee Regulred	
21 Suite, Apt.	# etc			Sulte, Apt. #, etc.						6. Election Campaign Financing \$5.00 May Be	
22				27						Trust Fund Contribution Added to Fees	
City & State	9			City & State						7. Is this nonprofit corporation a homeowners association?	
Zip					Zip Cou			<del>,</del>		8. This corporation owes or has paid the current year Intangible	
24	<del></del>		29		30	<b>—</b>			Personal Property Tax due June 30. Yes No		
	9. Name	25 and	Address of Current				T			10. Name and Address of New Registered Agent	
								Name			
REYNAERTS, JEAN V.							82	Street	t Address (P.O. Box Number is Not Acceptable)		
899 E. COLONIAL CIR. DAYTONA BEACH FL 32117							83	ļ			
Charles pendiffe verif							84	City	85 Zip Code		
								ľ		FL   T	
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									e tedrijker		
12.	PD		OFFICERS AND	D DIRECTORS 13.			ITL F			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition	
TITLE	ALIBERT CALLED				<del></del>				Į.	C. Charge C. Fossion	
NAME STREET ADDRESS							1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS 876 W. COLONIAL CIR.  CITY-ST-ZIP DAYTONA BEACH FL								T-ZIP	1		
TITLE	VPD				DELETE 2.1			71 - ZA	<del> </del>	Change Addition	
NAME	SWENSON, EDITH				2.21				Ì		
STREET ADDRESS			ONIAL CIRCLE	2.3 \$			TREET	ADDRESS	ŀ		
CITY-ST-ZIP			BEACH FL	2.40			CITY-S	ST-ZIP			
TITLE	\$D				DELETE 3.1 T					Change Addition	
NAME	REYNAERTS, JEAN V.						3.2 NAME				
STREET ADDRESS			ONIAL CIR.	3.3 S			TREET	ADDRESS	RESS		
CITY - ST - ZNP								ST-ZIP		Olar Badilla	
TITLE						4.1 T			77	Change Addition	
NAME						4. 2 NA)			Cf	arbulon lucille to w colonial circle	
STREET ADDRESS								ADDRESS	A.	AND A COMMIN CITCHE	
CITY-ST-ZIP	DELETE						ITY - S ITLE	T-ZIP	DAYTONA BEACH, TL.		
TITLE							IAME		1	had stanige   East totalist	
NAME PROFES ADDRESS	STREET ADDRESS 910 N. COLONIAL CIR.						5.3 STREET ADDRESS		1		
DAVIONA BOLL CI								T-ZIP	1		
							ITLE	2 - 4·II.	$T^-$	☐ Change ☐ Addition	
****							MME			·	
								ADDRESS			
1									1		

14. I 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:

~ V Remouts 4

Leany. Reynaerts

4/03/98

**FILED** 

May 05 1998 8:00am

Secretary of State

362-1458