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FILED
May 20 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N10053 (9)

1. Corporation Name

LONG POND LANDING PROPERTY OWNERS' ASSOCIATION,
INC.



Principal Place of Business

Mailing Address

P.O. BOX 321
CHIEFLND FL 32626
US

P.O. BOX 321
CHIEFLND FL 32626
US

3. Date Incorporated or Qualified

07/02/1985

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

6. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOWARD, GLENNA S
5151 NW 88TH STREET
CHIEFLND FL 32626

81 Name

Dona H. Hoy (man)

82 Street Address (P.O. Box Number is Not Acceptable)

2956 65 Ave So

83

84

St. Pete FL

FL

85

Zip Code 33712

11. Pursuant to the provisions of Sections 617.0501 and 617.0508, 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 agree to the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name 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 ☐ DELETE

NAME PD
STREET ADDRESS ROSKO, GEORGE
CITY-ST-ZIP 104 NORTH MAIN STREET, SUITE 300
GAINESVILLE FL

TITLE ☒ DELETE

NAME TD
STREET ADDRESS HOWARD, GLENNA S
CITY-ST-ZIP 5151 NW 88TH STREET
CHIEFLND FL

TITLE ☐ DELETE

NAME VD
STREET ADDRESS THOMPSON, FREDERICK
CITY-ST-ZIP 104 NORTH MAIN STREET, SUITE 300
GAINESVILLE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

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☐ Addition

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 address.

SIGNATURE: Dona H. Hoy (man) 4-18-98 813-766-8167

CR2E037 (10/97)