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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT #N10096

1. Corporation Name

MANDARIN GLEN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2980 HARTLEY RD WEST STE 4 JACKSONVILLE FL 32257	2180 W SR 434 STE 5000 LONGWOOD FL 32779-5044

3. Date Incorporated or Qualified: 07/08/1995

3a. Date of Last Report:

2. Principal Place of Business — 21:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 22:

Suite, Apt. #, etc. — 27:

City & State — 23:

City & State — 28:

Zip — 24: Country — 25:

Zip — 29: Country — 30:

4. FEI Number: 59-2564623 ☐ 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

9. Name and Address of Current Registered Agent

CATHRYN WINTERFIELD
SENTRY MANAGEMENT, INC.
2980 HARTELY RD W, STE 4
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PD HAWKINS,NANCY 3270 RICKY DR #2301 JACKSONVILLE FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	VD HAWKINS,NANCY 3270 RICKY DR #2301 JACKSONVILLE FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	400002182894 -05/19/97--01060--017 ***61.25	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	TD NORRIS,TOM 3270 RICKY DR #1001 JACKSONVILLE FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D BLUNNY,TONY 3270 RICKY DR #2004 JACKSONVILLE FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	D SHOUSE,ROBERTA 3270 RICKY DR #1803 JACKSONVILLE FL	☐ Change ☒ Addition

CR2E037 (9/96)

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: Thomas B. Norris 3/31/97 5/8/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MANDARIN GLEN CONDOMINIUM ASSOCIATION, INC.
1997 ADDITIONAL OFFICERS AND DIRECTORS

7.1	TITLE	D
7.2	NAME	GOTTUSO,NICK
7.3	STREET ADDRESS	3270 RICKY DR #904
7.4	CITY- ST- ZIP	JACKSONVILLE FL

8.1	TITLE	D
8.2	NAME	STEMPLE,DOROTHY
8.3	STREET ADDRESS	3270 RICKY DR #902
8.4	CITY-ST-ZIP	JACKSONVILLE FL

9.1	TITLE	D
9.2	NAME	MCKELLER,DIANE
9.4	STREET ADDRESS	3270 RICKY DR #1303
9.4	CITY-ST- ZIP	JACKSONVILLE FL

10.1	TITLE
10.2	NAME
10.3	STREET ADDRESS
10.4	CITY-ST- ZIP