

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N10644 (5)
1. Corporation Name
GLEN LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

10033 9TH ST N 2ND FL
ST PETERSBURG FL 33716

C/O CONDO ASSOCIATES, INC.
300 31ST ST. N. #125
ST. PETERSBURG FL 33713
US

3. Date Incorporated or Qualified
08/09/1985

3a. Date of Last Report
07/26/1995

2. Principal Place of Business
21 **3001 Executive Drive**

2a. Mailing Address
26 **3001 Executive Drive**

4. FEI Number
59-2750616

Applied For
Not Applicable

Suite, Apt. #, etc.
22 **Suite 260**

Suite, Apt. #, etc.
27 **Suite 260**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State
23 **Clearwater, FL**

City & State
28 **Clearwater, FL**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip
24 **34622** 25 **U.S.A.**

Zip
29 **34622** 30 **U.S.A.**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMPBELL, JUDY
C/O CONDOMINIUM ASSOCIATES, INC.
300 31ST STREET NORTH #125
ST. PETERSBURG FL 33713

81 Name **Rand E. McNeal**
82 Street Address (P.O. Box Number is Not Acceptable)
Condominium Associates
83 **3001 Executive Drive, Suite 260**
84 City **Clearwater** 85 State **FL** 86 Zip Code **34622**

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 **Rand E. McNeal**

(NOTE: Registered Agent signature required when reinstating)

DATE **4/10/96**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
SD	MASSEY, WINI	8623 18TH WAY N	ST PETERSBURG FL	<input type="checkbox"/>
PD	MAHAZ, JOSEPH	1920 GLEN LAKES BLVD N	ST PETERSBURG FL	<input type="checkbox"/>
VPD	FERNANDEZ, RICK	1747 87TH TERR N	ST PETERSBURG FL	<input type="checkbox"/>
TD	DE LA TORRE, LYNN	1717 87TH TERR N	ST PETERSBURG FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
			33702	<input checked="" type="checkbox"/>
			33702	<input checked="" type="checkbox"/>
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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: **Sandra B. Mortham**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **4/17/96**

Date

Daytime Phone #

CR2E037 (12/95)