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Mar 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N11894** (5)

1. Corporation Name

NATURE'S HIDEAWAY PHASE IA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

C/O ROBERT W. PARKINSON
7232 OTTER CREEK DRIVE
NEW PORT RICHEY FL 34655

Mailing Address

C/O ROBERT W. PARKINSON
7232 OTTER CREEK DRIVE
NEW PORT RICHEY FL 34655-4057



2. Principal Place of Business

21 7227 OTTER CREEK DR.

Suite, Apt. #, etc.

22 City & State

23 New Port Richey, Fla.

Zip

24 34655

Country

25 USA

2a. Mailing Address

26 7227 OTTER CREEK DR.

Suite, Apt. #, etc.

27 City & State

28 New Port Richey, Fla.

Zip

29 34655

Country

30 USA

9. Name and Address of Current Registered Agent

GIBILARO, SUSAN
7224 HIDEAWAY TRAIL
NEW PORT RICHEY FL 34655

3. Date Incorporated or Qualified
11/04/1985

3a. Date of Last Report
03/01/1996

4. FEI Number
59-2854416

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

10. Name and Address of New Registered Agent

81 Name

Ralph Rinaldi

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

7227 OTTER CREEK DRIVE

83

84 City

New Port Richey

FL

85 Zip Code

34655

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 Ralph Rinaldi
Signature, typed or printed name of registered agent and title if applicable

Ralph Rinaldi
(NOTE: Registered Agent signature required when reinstating)

1/27/97
DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME GIBILARO, SUSAN
STREET ADDRESS 7224 HIDEAWAY TRAIL
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE STD ☒ DELETE

NAME PARKINSON, CAROLE
STREET ADDRESS 7232 OTTER CREEK DR.
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE D ☒ DELETE

NAME WEAVER, RENEE
STREET ADDRESS 7204 HIDEAWAY TRAIL
CITY-ST-ZIP NEW PORT RICHEY FL

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