## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N12648

(4)

1300 LIVE OAK PLANTATION PROPERTY OWNERS ASSOCIA TION, INC.

	· · · · · · · · · · · · · · · · · · ·					
Principal Place	e of Business	Mailing Address			i comisson mas comen using more with a solid with the	sie mener mener minst kinder mener Abate en he
1970 MILLSTREAM TALLAHASSEE FL 32312 US		1370 MILLSTREAM TALLAHASSEE FL 32312 US	TALLAHASSEE FL 32312-2550			
					3. Date Incorporated or Qualified 12/19/1985	3a. Date of Last Report 04/24/1996
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Suite, Apt #, etc.		26 Suite, Apt. #, etc.			59-3958166	Not Applicable
22		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	C .	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Countr		Trust Fund Contribution	Added to Fees
24	25	29	30	,	6. This corporation has liability for i	ntangible tax under s. 199.032, Yes 🔲 No
	9. Name and Address of Cur				10. Name and Address of New Re	
			81	Name		
BUTLER,	NEIL H		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)
BUTLER				00017100	Too (1.5. Box Harrison to Hot Hoopkas	
1	rd street		83	)		
TALLAHA	ISSEE FL 32303		84	City	·	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.	0502 and 617.1508, Florida Sta	itutes, the abov	re-named cor	poration submits this statement for the p	urpose of changing its registered
office or re agent. La	egistered agent, or both, in the Si m familiar with, and accept the ob	tate of Florida. Such change wa oligations of, Section 617,0503.	as authorized b Florida Statute	y the corpora	ation's board of directors. I hereby accept	t the appointment as registered
SIGNATURE		,		. •		
	Signature, typed or printed name of registered			ent signature requ	rred when reinstating)	DATE
12.		AND DIRECTORS	13,		ADDITIONS/CHANGES TO OFFIC	
TITLE	SD SUCCESSION	DELETE	1.1 TITLE			Change Addition
NAME	MICA, DAVID		1.2 NAME	1		
STREET ADDRESS	1262 MILLSTREAM			T ADDRESS		
CITY-ST-ZIP TITLE	TALLAHASSEE FL VD	DELETE	1.4 CITY- 2.1 TITLE	ST-ZW		☐ Change ☐ Addition
NAME	THOMAS, JOHN		2.1 TITLE 2.2 NAME			Circulate Circulation
STREET ADDRESS	1430 MILLSTREAM			T ADDRESS		1
CITY-ST-ZIP	TALLAHASSEE FL		2.4 CITY-			
TITLE	TD	DELETE	3.1 TITLE	31-24	****	Change Addition
NAME	SPEER, CHRISTINE		3.2 NAME			
STREET ADDRESS	1371 MILLSTREAM		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32312		3.4. CITY-	ST-ZIP		
TITLE	D	DELETE	4.1 TITLE			Change Addition
NAME	MILLER, RANDY		4. 2 NAME			
STREET ADDRESS	1334 MILLSTREAM		4.3 STREE	T ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	· · · · · · · · · · · · · · · · · · ·	4.4 CITY-	ST-ZIP		
TITLE	PD	☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
KAME	GAVALAS, GEORGE		5.2 NAME	ĺ		
STREET ADDRESS	1370 MILLSTREAM		5.3 STREE	T ADDRESS		
CITY-S1-ZIP TITLE	TALLAHASSEE FL	DELETE	5.4 CITY-	ST-ZIP		Change Laddita
NAME :		[_] VELCE	6.1 TITLE			Change Addition
STREET ADDRESS			6.2 NAME			
CITY-ST-ZIP				T ADDRESS		•
14. I do heret	by certify that the information supp	plied with this filing does not gu	6.4 CITY-	emotion state	d in Section 119.07(3)(i), Florida Statutes	Lighther certify that the
informatio Lam an ol	o indicated on this annual report.	or supplemental annual report in or the receiver or trustee emp	is true and acc lowered to exe	urate and the	at my signature shall have the same lega ort as required by Chapter 617, Florida S	l affant se if made under noth: that

SIGNATURE:

**FILED** 

May 20 1997 8:00am

Secretary of State

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